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COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

COMMISSION D'ENQUETE
SUR L'USAGE DES DROGUES
A DES FINS NON MEDICALES

January 30, 1970
Weldon Hall
Dalhousie University
HALIFAX, Nova Scotia

COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

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SUR L'USAGE DES DROGUES
A DES FINS NON MEDICALES

BEFORE:

Gerald LeDain,	Chairman,
Ian Campbell,	Member,
J., Peter Stein	Member,
H.E. Lehmann, M.D.,	Member,
James J. Moore,	Executive Secretary,

RESEARCH:

Dr. Ralph Miller,
Dr. Charles Farmilo.

SECRETARY TO THE CHAIRMAN:

Vivian Luscombe.

January 30, 1970.
Weldon Hall,
Dalhousie University,
HALIFAX, Nova Scotia.

1 --- Upon commencing at 12:25 P.M.

2
3 THE CHAIRMAN: Ladies and gentlemen,
4 I call this hearing of the Commission of Inquiry
5 Into the Non-Medical Use of Drugs to order.

6 Before we begin, I should like
7 to introduce my colleagues on the Commission. On
8 my far right, Dean Ian Campbell of Montreal; to my
9 immediate right, Dr. Heinz Lehmann of Montreal; I
10 am Gerald LeDain; on my left Mr. J. Peter Stein of
11 Vancouver.

12 And our colleague, Professor Marie-
13 Andree Bertrand, has been unable to get out of
14 Montreal because of weather and flying difficulties,
15 so we much regret that she is not able to be with us
16 today.

17 We have spent a day and a half now,
18 in Halifax, and it has been very informative. We
19 have had several very thoughtful submissions made to
20 us, and we have, I think, got quite a good insight
21 into what the community is attempting to do, how it
22 is responding to this phenomena of non-medical drug
23 use, and we are very impressed by what we have heard,
24 about the concern and the way the whole issue is
25 being tackled.

26 When we recessed this morning,
27 we heard a very thoughtful paper from Dr. Silverman,
28 on the nature of the decisions involved, particularly
29 with respect to the law. And while we have no
30 structure, no formal program for this session, we have

1 come here to listen to your views, your opinions, and
2 we will, I think, be particularly interested in having
3 your views on these very fundamental questions, which
4 Dr. Silverman's paper raises, and deals with, and of
5 course which we have to wrestle with.

6 And what is to be our general
7 attitude towards social responsibility for non-medical
8 drug use? I mean, is there a role, or responsibility,
9 for government at all in this field? What should be
10 our general response to this?

11 Actually it is very fundamental.
12 How do we look at these things? Do we make any
13 distinctions? Is it all bad, or are there distinctions
14 to be made, and what kind of criteria are we to use?
15 How do we regard the question of harm in regard to
16 an individual point of view, from a social point of
17 view, and what is involved in determining whether there
18 is harm in a given case?

19 What evidence do we accept? These
20 are the kind of questions we are wrestling with.

21 Then we get to the next question
22 of analysis, what is the responsibility of government,
23 and to what extent is there a role for law? What is
24 the appropriate role for law, in respect of a phenomenon
25 like this, which is a matter of conduct?

26 These are the fundamental questions
27 to start with. We have to have a philosophy about
28 the whole question of social response here, before we
29 go into detail.
30

1
2 So we would welcome particularly,
3 benefit from your views on these general issues, but
4 I don't mean to restrict discussion in any way, and
5 if you choose other matters, anything you can con-
6 tribute to our understanding of this would be welcome.

7 We have been asked in particular
8 to try to explain the causes of non-medical drug use,
9 and its significance, its large social significance.
10 What is the meaning of this today? What is it saying
11 to us? What is it symptomatic of, and so on, and
12 any help you can give us there, what you feel is at
13 the root of the matter? What is its relationship
14 to other things that are happening in society?

15 We need other help of course,
16 on anything that can be contributed on effects.

17 Now as to effects, we
18 are asked to consider the current state of medical
19 knowledge, and this is of course reviewing papers
20 of consulting experts, weighing of the evidence, and
21 it is very, very technical and detailed, but that
22 does not mean it is a matter to be excluded from the
23 way of opinion and discussion. On the contrary.
24 Because we find that once you have certain facts
25 tied in, and it is not easy in the face of scientific
26 opinion, then you have to take a view, and you have
27 to decide what you should make of that fact from a
28 social policy point of view.

29 I don't want to take any more
30 time in introduction. It is free, unstructured,

1 informal, and I throw it over to you.

2 It is your meeting, to assist us
3 in any way you think we should be helped in our
4 attempt to understand this phenomenon.

5 And we have microphones here I
6 think, if you wouldn't mind coming to the microphone.

7 Gentleman at the microphone.

8 THE PUBLIC: I wanted to say, that
9 first of all I am very gratified by the interest of
10 the Commission in this very problem, and the interest
11 of the government.

12 I am also very interested in your
13 interest in the philosophy behind the current drug
14 laws and sentencing policies, especially currently.

15 I would like to briefly describe
16 an evaluation that I have made on the current
17 sentencing policies in regard to narcotics offenders,
18 and I would like to criticize those current policies,
19 analyze the reasons for the basic philosophies under-
20 lying the sentencing policies we find today, make
21 some recommendations to you for remedies to the
22 defects I have noticed.

23 I should explain, a written report
24 will follow this oral presentation, so I am not going
25 to bother too much with substantiating what I have
26 to say with authorities for today.

27 I would like to first of all examine
28 some current cases, with an idea of sentencing
29 policies. The Reynolds case in B.C. 69, B.C. Court
30

1 of Appeal, suggests that sentences may not be --
2 imprisonment sentences may not be mandatory as far
3 as deterrents go. They say the element of deterrence
4 is primary that "It is the function of the judge or
5 magistrate imposing sentence to apply his mind to
6 the question of whether any particular case be thought
7 in special circumstances exists, to justify a sentence
8 which is not primarily deterrent in its effect."

9 In that case, the Crown appealed
10 a one day imprisonment, and a five-hundred dollar
11 fine sentence, and the court decided that seeing as
12 the individual was repentent, and seeing that the use
13 of marijuana was not prevelant in that area, that the
14 one day sentence would be sufficient.

15 I suggest that that trend is not
16 being followed today.

17 For example, two cases in Ontario
18 suggest this. The Hudson case in '67, Simpson case
19 in '68, both involved young persons charged with
20 trafficking. They had no previous records, good
21 backgrounds, etc.

22 In the first case, the court
23 decided a suspended sentence. The youth was given
24 a 10:00 P.M. curfew in order to go back to school,
25 psychiatric treatment, etc.

26 The second case, which I feel is
27 more reflective of a modern trend from the survey I
28 have done, virtually the same court, five men
29 mentioned, which were two of the same Appeal Court
30

1 judges mentioned in the Hudson case, meted out a
2 sentence of nine months definite, six months indefinite.

3 Now, why the difference, and why
4 this difference as it is reflected today all across
5 Canada.

6 I would like to quote from the
7 judgment as symptomatic. "The evil of trafficking in
8 marijuana in the city of Toronto is markedly on the
9 increase. Such trafficking is reaching into the
10 secondary schools. Cases of such trafficking among
11 juveniles are now a matter of frequent occurrence in
12 Juvenile Courts of this city. Rehabilitation becomes
13 secondary."

14 This came out in the Adelman
15 decision in B.C., 1969 decisions. "Where the incidence,"
16 they say, "Where the incidence of a particular crime
17 has become so great that the court must punish
18 severely in order to assist in bringing it under
19 control, rehabilitation becomes secondary. Even with
20 the greatest concern for the welfare of offenders, the
21 courts cannot allow the criminal law to be frequently
22 dealt with impunity."

23 In that judgment they also suggested,
24 or Judge Tyso suggested that a suspended sentence
25 was not adequate. Suspending sentence, and putting
26 the accused under his own bond to be of good behavior
27 cannot be reasonably expected to deter others who
28 might be disposed to do what the respondent did.

29 He suggests that only exceptional
30

1 cases were called for probation, instead of punishment.

2 In this particular case, I think
3 a landmark modern case, the magistrate noting the
4 exceptional exemplary record of the accused, said
5 that a jail sentence for him would be "A personal
6 catastrophe."

7 Notwithstanding the principle that
8 in sentencing, the first consideration is the state,
9 broad deterrence, rather than individual deterrence.

10 But the Appeal Court said this, "A
11 person of superior education and intellect, is all
12 the more blameworthy; ", and more or less, the idea that
13 he ought to have known better. And so they imposed
14 a prison sentence.

15 Now, a recent New Brunswick case
16 has suggested the same sort of thing. Deterrence is ---

17 THE CHAIRMAN: What is the name
18 of that New Brunswick case?

19 THE PUBLIC: The New Brunswick
20 case, yes, the name of the case I don't have, but it
21 is Mr. Justice Limerick, three months ago, commenting
22 on a Fredericton man convicted of trafficking in
23 LSD and hashish.

24 He is a Court of Appeal judge, and
25 he changed the sentence from three months to two
26 years less a day. It was three months ago.

27 THE CHAIRMAN: Where is your
28 knowledge of that case from?

29 THE PUBLIC: November 25, 1969
30

1 C.B.C. News report.

2 My particular quote comes out of
3 the current edition of the "Mysterious East" publication

4 THE CHAIRMAN: The "Mysterious
5 East"?

6 THE PUBLIC: Yes. It is quoted
7 from the judge. "In recent years" he says, "the
8 courts have placed an emphasis on the rehabilitation
9 of the accused, and rightly so. In a situation such
10 as created by the drug situation however, deterrent
11 effect on the others far outweighs the consideration
12 of the possible rehabilitation of one individual."

13 Then he comes out with the
14 astounding declaration, which I would like to bring
15 to your attention today, which is one of the main
16 thesis of my presentation.

17 "It may be that harshness of the
18 sentence will not be a deterrent ---"

19 something wrong with tape. Skips over this section

20 This is a matter which experience
21 alone will disclose."

22 And he has just given a two year
23 imprisonment sentence, instead of the three months
24 of the trial court.

25 The same occurred in the McNichol
26 case, which is a landmark. Briefly describing it,
27 the magistrate was said to have unduly considered
28 the interests of the individual. The accused failed
29 to consider those of society

This is a trend today. Community interest, public interest predominates over individual interest, in spite of the fact that this individual was a first offender, good background, about to enter university. The magistrate decided that a one month sentence and a fine would allow him to continue his academic career, etc. The Appeal Court, one year imprisonment.

Just by one more illustration of this idea of public deterrence over personal deterrence. 1968 B.C. case, Hartley and McCallum, which said, "Keeping in mind the good character of these two persons, and that a jail sentence is not needed for their rehabilitation as they have learned their lesson". The magistrate was convinced.

"I still think the public in this Province must understand that those who use marijuana, and are apprehended, are going to be punished severely. I would impose a sentence of six months on each of the appellants." They had been given suspended sentences.

Now, the same inequities, or the same disparities that I attempted to show between trial courts and appeal courts, also exist as far as courts' attitudes towards obvious disparities in sentences.

I would quote as examples, the (Charney) case, Regina vs. (Charney) and Owen, in Ontario,

1 1969. The accused was jointly charged with another
2 in similar circumstances. He received a suspended
3 sentence, and was put on probation for a term of one
4 year. The other individual pleaded guilty, and was
5 sentenced to six months definite, and nine months
6 indefinite.

7
8 The court said there is a disparity
9 in this sentence between the two accused. The facts
10 attending the incident in which the two accused were
11 involved, were not sufficiently distinctive to warrant
12 the markedly different sentences which the magistrate
13 meted out to them. So the other sentence was made a
14 suspended sentence as well.

15 However, in a B.C. Court of Appeal,
16 1969, Rex vs. Owen, we have a completely different
17 treatment of the same sort of problem, that is,
18 disparate sentences with regard to the same offenders,
19 and the same fashionable circumstances. I am referring
20 to Rex vs. Campbell, 1969 B.C. Court of Appeal.

21 The accused was sentenced to ten
22 years for heroin trafficking. The appellant had
23 claimed that his ten year sentence was disproportionate
24 to the sentence of four years imposed on his confederate
25 who was an addict with a record.

26 Now, the judge, Chief Justice
27 Davey, rather than attempting in some way to dis-
28 tinguish the two cases, or rather than attempting to
29 reconcile them as we see in a previous case, said,
30 "The lighter sentence may very well have been low.

This sentence was an appropriate sentence for the offense Campbell committed. That disposes of that argument."

I also suggest that disposes of any notion of consistency in sentence, in regard to this particular matter in Canada.

So now I would like to turn to examine the courts' policy as far as punishment as a deterrent.

One illustration, I think, will suffice to exemplify the current Canadian court attitude. It is a B.C. case, Regina vs. Martin in the B.C. County Court, '69 again.

In the Appeal Court, they said, "The learned magistrate imposed this sentence purely for the purposes of deterrence. If sentences are to be imposed as a deterrent, they must be severe sentences. It was no good hitting these people who deliberately engage in an unlawful practice with relatively short sentences, and expect that to operate as a deterrent. If this thing is to be stopped, these people must be hit hard."

Four years imprisonment was meted out in this case, for trafficking in marijuana.

An earlier case, a non-drug case, describes the underlying philosophy of deterrence, and that is what I would like to deal with today, in my thesis.

Deterrence, I think it is a good

1 description in the Willard case, Rex vs. Willard,
2 deterrence is described as "A reasonable and common-
3 sense use of the emotion of fear, brought into play so
4 the offender may be afraid to offend again, and also
5 others who may contemplate offending may be restrained
6 by the same controlling emotion. This applies in
7 other cases where the particular form of crime has
8 become widespread."

9
10 Reflected in a recent Vancouver
11 case, Rex vs. Guerdler, unreported. To discuss this
12 deterrent aspect in respect to the law, "A generally
13 objective attitude to the question of use and
14 possession of marijuana, and a general disregard for
15 the fact Parliament has decreed that possession of
16 marijuana is a crime, has been noted. It is necessary
17 that there must be a message that the possession of
18 marijuana is a crime."

19 So this attitude, this philosophy,
20 of deterrence is based on the view of man as a rational,
21 calculating being. I think it is distillation of the
22 old utilitarian notion, where the man will
23 weigh the possible pleasures of, in this case, smoking
24 marijuana, or the possible pains of punishment.

25 However, what I would like to point
26 out is, that this notion of deterrence depends on
27 effective law enforcement. Deterrent theory will not
28 work sufficiently, unless law enforcement is sufficient.
29 I mean efficient.

30 Now, is law enforcement efficient

1 in Canada today? One way of ascertaining this is
2 to compare the number of apprehensions with statistics
3 regarding the rate of usage, and I have done this with
4 respect to this law school.

5 First of all, I would like to just
6 note that generally there has been a great trend in
7 Canada towards increased rates of conviction. We
8 note that in 1967, 1,234 people were charged with
9 narcotics offenses. The number of those cases which
10 involved marijuana in 1967 was greater than all
11 previous years combined.

12 Since 1923, when legislation first
13 appeared -- for legislation prohibiting its use, we
14 found that out of 1,000 arrests in 1967, 309 con-
15 victions in a given period would spiral 300 percent,
16 when compared to the same period in 1966.

17 In 1967 there were a total of 586
18 convictions involving marijuana offenses. The figure
19 jumped to 1,429 in 1968. So that the conviction rate
20 has been rising, but the question I want to pose to
21 you today is, has it compared, has it kept pace with
22 the rate of usage?

23 I did a survey in law school, the
24 results I would like to acquaint the Commission with.
25 I should first premise it by saying, that it was a
26 rather limited survey of about 100 first and second
27 year students. I think it was accurate enough to
28 give an indication of the rate of law-breaking with
29 regard to narcotics offenses.
30

The other thing I would like to point out before I release the details, is that I think when you consider that the subjects of this survey of law students, the figures are all the more significant, because it would appear to me to be obvious that law students and, well, professional students, generally, professionally, are jeopardizing themselves, more perhaps than other aspects of society, because of the rigid requirements as far as entering the bar goes, the prohibitive effects of a criminal record.

I surveyed 51 students in first year law, and asked several questions. The first one was to do with experimentation; have you ever tried one of three broad categories, cannabis, hallucinogens, the hard drugs? And then a question designed to go further, and discover present usage in addition to experimentation.

Of the 51 students surveyed, 31 percent had at one time or another, experimented. Now, of that 31 percent, 44 percent, or 14 percent of the total surveyed presently use marijuana at the rate of at least once monthly.

THE CHAIRMAN: That 14 percent of the 51 students, or all the students?

THE PUBLIC: 14 Percent of all
the students surveyed in first year.

THE CHAIRMAN: In first year.

THE PUBLIC: The 44 percent

1 referred to the number that had experimented who had
2 continued usage, that is at the rate of once monthly.

3 I broke the rate figures down into
4 four categories, monthly, several times monthly,
5 weekly, or several times.

6 THE CHAIRMAN: Would it be possible
7 for you to give us a copy of that survey?

8 THE PUBLIC: Yes.

9 THE CHAIRMAN: Do you have it here
10 today?

11 THE PUBLIC: Yes.

12 The rate, this is out of the total
13 group surveyed, was 4 percent used several times
14 weekly, 2 percent used weekly, 2 percent used several
15 times monthly, and 6 percent used monthly.

16 The results were a little more
17 marked with second year students, 47 surveyed. 47
18 percent had at one time or another experimented, and
19 of that 47 percent, over half, which is about 25 per-
20 cent of the total surveyed, were present users. 25
21 Percent of the total survey were present users, that
22 is to the extent of once a month, or greater frequency.
23 It worked out to 9 percent using monthly, 6 percent
24 using several times monthly, 10 percent using weekly,
25 and 4 percent using several times weekly.

26 One other factor I would like to
27 bring out, is that perhaps these statistics would
28 seem all the more startling in view of the fact that
29 Nova Scotia is not a prominent contributor, shall I
30

1 say, to the total number of convictions in the
2 country. In fact, though I don't have current
3 statistics, I know in 1967 there were no narcotics
4 offenses at all, in Nova Scotia, according to the
5 Dominion Bureau of Statistics.

6 Now, I have a great number of
7 other figures with regard to usage rates. I am
8 sure that the Commission has been deluged with them,
9 and I won't go into them.

10 THE CHAIRMAN: Excuse me, I was
11 just wondering, your survey was confined to the first
12 two years.

13 THE PUBLIC: First two years,
14 yes.

15 THE CHAIRMAN: Any reason for
16 that?

17 THE PUBLIC: The reason for that
18 was strictly time limitation. The survey was con-
19 ducted this week, and scheduling didn't allow me to
20 accurately get ahold of third year law students
21 who are spread out. I would like to, in the future
22 perhaps, conduct a more extensive survey in the law
23 school, but for now I think however small a sample
24 was surveyed here, it is certainly an indication of
25 a trend.

26 And the point that I am trying
27 to make, is that there is a great disparity between
28 the rate of usage and the effectiveness of enforce-
29 ment, which means that the deterrent effect is
30

1 minimal. That is, many people are breaking the laws.
2 There are in consideration of that vast number, very
3 few being apprehended, very few of that mass number
4 who know of people who are being offended, and there-
5 fore this pure aspect of deterrence which is primary
6 in the Canadian courts, is rather ineffective.

7
8 THE CHAIRMAN: Well, what do you
9 base that conclusion on? What reason have we to
10 believe that despite the current increase in use, that
11 the law is not having some deterrent effect, you know,
12 limiting use. I mean how do we get it as a deterrent
13 effect of the law.

14 There is this, as you say, this
15 very marked disparity between what a conservative
16 estimate of use, let us say, and the number of
17 offenders being dealt with by the law. But that may
18 say something about the efficiency of the law, let
19 us say, to use the expression.

20 But how do we get at the actual
21 deterrence? How do we know it is not having some
22 deterrent effect?

23 THE PUBLIC: I certainly am not
24 even beginning to deny there is a very strong
25 deterrent.

26 THE CHAIRMAN: I am not making
27 a proposition here, I am just asking you what your
28 view is?

29 THE PUBLIC: I certainly wouldn't
30 deny that there is a very strong deterrent effect

1 operative right now, the fact that narcotics
2 penalties have a criminal record attached to them,
3 the severity of penalties, this sort of thing.

4 But in considering that fact
5 along with a number of people who are nonetheless
6 undeterred, I think the deterrent effect is minimal,
7 and I think it ought to be minimized by courts today.

8 This is one of my recommendations.

9 THE CHAIRMAN: Well, would you
10 make a distinction in this respect, between possession
11 and trafficking?

12 I mean, your assembly of sentencing
13 policy doesn't make particular reference, I think,
14 to possession offenses since the amendments in August
15 where there has been a definite apparent change in
16 sentencing policy, with respect to first offenders.

17 Would you make a distinction
18 between possession and trafficking, with respect to
19 deterrent effect?

20 THE PUBLIC: I would say the 1969
21 amendments really didn't make that much of a diff-
22 erence.

23 That is, although the record
24 doesn't go to Ottawa with the R.C.M.P. there is still
25 nonetheless a criminal record associated with local
26 police.

27 Penalties, and I think the New
28 Brunswick offense that I just spoke of, seemed to
29 be increasingly severe nonetheless, and I wouldn't make
30

1 a general distinction between possession and trafficking.

2 There is two other small points
3 I have. Probably I am taking too much time, but there
4 are some things I would like to say.

5 One is, that the structure, even
6 if this disparity in sentencing that I have been
7 talking about, the disparity between Magistrates
8 Courts and Appeal Courts, and the disparity across
9 the country, and the disparity with regard to two
10 offenders in the same circumstances, even if that
11 is resolved, the problem is not yet resolved because
12 the structure itself, the structure of our penal
13 system forecasts inevitable disparities.

14 The reasons? Appeal Courts are
15 Federally oriented, they are Federally appointed.
16 Appeal Courts are not required to hand down written
17 judgments, and in many instances they don't. Appeal
18 Courts may be respected by lower courts, but the
19 remarks of Mr. Justice Kirby in Calgary recently,
20 for example, suggests that some lower courts are
21 quite willing to operate independently of Appeal
22 Courts.

23 Other aspects of this problem
24 is the facilities aspect of it. Even if the same
25 sentences were to be given throughout the country,
26 we know that financial abilities of the provinces
27 are so varied, that the same sentence
28 doesn't mean anything with respect to Prince Edward
29 Island, compared to British Columbia, for example.
30

1 I would like to quote from a
2 1965 discussion of sentencing in Canada, by Professor
3 Jobson at this law school, with regard to sentencing
4 policy. I think it is very pertinent.

5 "Under our system of divided
6 responsibility, equal justice ~~in all is impossible.~~
7 as
8 For as long /there are substantial differences in
9 the economic development of the provinces, there
10 will continue to be substantial disparities between
11 the correctional systems in Canada. ~~apart~~
12 from the fact that the judges and
13 magistrates are limited in the sentencing process
14 by the custodial and correctional institutions.
15 Thus, persons convicted in the poorer parts of the
16 country are more likely to get sentenced to a peni-
17 tentiary term, than persons convicted in wealthier
18 provinces."

19 "The reality is that in competition
20 for resources in the poorer provinces, justice is
21 received in the old county, ~~jails~~ and the old county jails
22 remain the only alternative to the penitentiary and
23 ~~which~~ probation parole services/have only made quite a
24 modest start. A brief survey of provincial
25 institutions will confirm these observations."

26 Prince Edward Island, for example,
27 three county jails, no provision for treatment for
28 juvenile offenders, no treatment for drug addicts
29 or any specialized type of offenders.

30 This is especially hard with

1 regard to drugs, for two categories of persons, drug
2 addicts and young offenders, non-criminal offenders,
3 Prince Edward Island has no juvenile facilities at
4 all.

5 British Columbia in contrast, has
6 a special wilderness camp based on a survival program,
7 for drug addicts, for alcoholics, prisoners in final
8 stage of sentence, and pre-release, etc... Plus a very
9 varied work program in all prisons, very varied
10 educational programs allowing academic vocational
11 training.

12 The same applies to Ontario.

13 THE CHAIRMAN: What are your
14 general conclusions from this study about the
15 appropriateness of the criminal law in this field?

16 Is there a role for criminal law,
17 any role for criminal law in your judgment in respect
18 of non-medical drug use?

19 Perhaps we could get an opportunity
20 to hear your opinion here.

21 THE PUBLIC: All right. That is
22 fine.

23 My opinion is that if sentencing
24 is -- if the law is going to deal with, especially
25 marijuana offenders, and this question is really
26 outside the scope of my report, but if the law is
27 going to deal with marijuana offenders, then these
28 inequities with regard to institutions must vanish.

29 The responsibility is up to the
30

1 Federal Government. The inequities with regard to
2 sentencing policies must vanish. Perhaps courts of
3 appeal ought to be emphasized. Perhaps they are a good
4 medium for ascertaining continuity.

5 And furthermore, the deterrent
6 effect, as a whole, has to be underemphasized by the
7 courts, simply because it is not working.

8 What are the answers? Well, I
9 don't think the answer is stepped up police activity,
10 more efficient police activity, because I hope the
11 statistics I have given with respect to this law
12 school alone, indicate it would be virtually impossible
13 alone
14 for the police to tackle this problem.

15 I would suggest suspended sentence
16 for offenders, and thank you if I took up so much time.

17 THE CHAIRMAN: Could we have a
18 copy of the survey?

19 THE PUBLIC: Yes.

20 THE CHAIRMAN: Would you be able
21 to leave a copy?

22 THE PUBLIC: I am compiling my
23 findings in a written report.

24 THE CHAIRMAN: You don't have
25 a written report?

26 THE PUBLIC: It is as yet incoherent.
27 I will send it along to the Commission, the written
28 report, and the survey I can give you later.

29 DR. LEHMANN: I wonder whether I
30 could ask you a question.

1
2 You know probably a good deal
3 more about the law than I do, but you did mention
4 that the law ought to be more consistent, if there
5 is going to be a criminal law with respect to drug
6 convictions.

7 Now, is this a ruling principle
8 in the criminal law, that the criminal law has
9 to be consistent? Because if that is so, there
10 shouldn't be any difference in sentencing for
11 burglary, for instance, and yet there is a very
12 wide variety and nobody is complaining about it.

13 THE PUBLIC: The inconsistencies
14 I am talking about are not with regard to the
15 sentences as handed down. Certainly the circumstances
16 of each case handle that.

17 What I am talking about, are what
18 the differences between what the trial courts say,
19 and what the appeal courts say, for example, and the
20 disparities between sentences with regard to the
21 same offense.

22 That, I would say, is a disparity
23 that can be remedied, and ought to be remedied.

24 THE CHAIRMAN: Would you like to
25 go to the microphone please?

26 THE PUBLIC: I just wanted to
27 emphasize one thing that was just brought out. There
28 doesn't seem to be too much coherent sense to the
29 narcotics law, as at present.

30 I take it one of the tasks of the

1 Commission is to try and make some sense of the
2 law.

3
4 Now, look, it is still being
5 pursued vigorously. In other words, it is really
6 nothing more than a war. From the point of view of
7 young people, it is a war to declare positions.

8 You know, the users on one hand,
9 and those people who enforce the law on the other.
10 There has been a lot of thoughtful material presented
11 to the Commission, and from the looks of it, it is
12 going to take a long time before it really gets
13 around to be able to make any sort of, you know,
14 substantial recommendations about the law.

15 I think that if it ever does
16 finally come to have something to say about, say,
17 keeping a certain law, about cannabis, you know, if
18 you want to point out if there really are harmful
19 aspects about cannabis in which the law should be
20 involved, and it should be deterring people, then I
21 think this war, as now conducted, is going to have to
22 stop.

23 I would urgently recommend the
24 Commission, if it has any present powers of pushing
25 anything at all, I would urgently recommend a
26 complete moratorium on arrests, and prosecution.

27 In other words, a truce in the
28 enforcement of this law. And if you do finally come
29 to have reasons that can this law be made and
30 enforced, I think it should be done over again. I

1 think this is the only way you can establish any
2 sort of communication in this matter with young
3 people.

4 We just pointed out, that just
5 having a repressive law is no deterrent, and I think
6 it has also been pointed out that a lot of things
7 that have been told young people in high schools,
8 particularly, about cannabis, about the soft drugs
9 particularly, have really been a lot of terrible fibs.

10 And I might point out also, that
11 this sort of thing has a kind of negative deterrence
12 when it comes to really dangerous drugs like heroin.

13 This has been pointed out too,
14 that if young people find out that marijuana isn't as
15 bad as these police types are saying, perhaps heroin
16 isn't either, you know?

17 THE CHAIRMAN: Do you think the
18 criminal law should be retained for heroin?

19 THE PUBLIC: I don't know about
20 heroin. „I haven't had much involvement with it.

21 My involvement in the past has
22 been, you know, with young people in high school,
23 that are sort of tinkering around, just considering
24 whether they would try some of these more common
25 things like marijuana, and like LSD.

26 I don't know about heroin. I am
27 just speaking about the soft drugs, or I am just
28 thinking probably of the grey drugs, because we can't
29 really decide what they are.
30

1
2 O.K., this is really all I have
3 to say. It is a matter that -- if the matter hasn't
4 been brought to you about a moratorium, I would like
5 to know what has happened to it.

6 THE CHAIRMAN: The matter has
7 been brought up before to us, but we can't say what
8 has happened to it.

9 I can't say what we have decided
10 about it. We are shortly to publish our interim
11 report, and I can't make statements at this time,
12 concerning our own conclusions.

13 As a matter of fact, we are here
14 to complete in effect, the initial phase of our
15 inquiry, and so that we must take into consideration
16 what we learn here, before we publish that report.

17 THE PUBLIC: What I am of course
18 suggesting, is sort of an emergency thing, while the
19 whole matter is weighed out, and decided.

20 THE CHAIRMAN: We understand that.

21 THE PUBLIC: Thank you.

22 DR. LEHMANN: May I just ask you
23 one question while you are still up there?

24 Why would you consider heroin a
25 hard drug? I know the R.C.M.P. calls it this, but
26 is that your reason why you call it a hard drug, and
27 a very dangerous ---

28 THE PUBLIC: Since I am trying
29 to speak from the point of view of people of my own
30 age and younger, and like, people that are on my

1 wave length.

2
3 Let me put it this way: I don't
4 think that anybody has to go out of his way too far
5 to prove to people that it is a dangerous drug
6 physically, that it has dangerous effects, that it
7 is addictive, and it seems to me that from my own
8 limited experience those people that go ahead and
9 use it, know full well this is going to happen, but
10 don't care.

11 Whereas on the other hand, things
12 like cannabis, marijuana, well there is this big
13 doubt.

14 THE CHAIRMAN: Big doubt about
15 what?

16 THE PUBLIC: Young people think
17 they are being told a lot of lies, that actually there
18 is not the slightest harmful thing wrong, physically,
19 psychologically.

20 MR. CAMPBELL: Does your position
21 then apply, that if there is harm done to the
22 individual, this is a reason for the law to intervene?

23 It would be the implication of
24 the law playing a role then, presumably of protecting
25 the individual from himself, or protecting him from
26 the consequences of his own actions, or decisions.

27 Is this the position you are
28 arguing?

29 THE PUBLIC: Well, no, it is not,
30 neither way, because I didn't come to speak on that

1 matter, so I would rather not answer your question.

2 DR. LEHMANN: But the only bad
3 thing about heroin that you know of, is addiction,
4 then?

5 THE PUBLIC: Myself, personally?

6 DR. LEHMANN: Yes.

7 THE PUBLIC: Yes.

8 THE CHAIRMAN: There is a gentleman
9 at this microphone.

10 THE PUBLIC: Yes sir, I have a
11 rather lengthy presentation to make. Would it be
12 possible for me to lower the mike so I could be
13 seated while I make this presentation?

14 THE CHAIRMAN: Certainly.

15 When you say lengthy, how lengthy
16 is it? We are only here for an hour to try to get
17 opinion, and we are resuming at 2:00 in the Lord
18 Nelson.

19 THE PUBLIC: I would suspect I
20 would be finished well before 2 o'clock, sir.

21 THE CHAIRMAN: We have to conclude
22 here at 1:30.

23 THE PUBLIC: That I am not so
24 sure of.

25 THE CHAIRMAN: Perhaps you had
26 better just proceed, but just keep in mind the fact
27 we don't have very much longer here.

28 We will go back to the Lord
29 Nelson this afternoon, and if it was convenient for
30

1
2 you to make a submission there this afternoon we
3 could hear you.

4 Perhaps you could at least
5 summarize your presentation.

6 THE PUBLIC: I will try as best
7 I can.

8 THE CHAIRMAN: All right, go
9 ahead. I am using up your time.

10 THE PUBLIC: Mr. Chairman, members
11 of the Commission, the report which I am presenting
12 today is a preliminary report which I will deliver
13 verbally, preliminary to a rather more comprehensive
14 report which I intend to submit in written form to
15 you, hopefully within the next week.

16 The question which I have posed,
17 and which I am attempting to answer by using various
18 philosophers of the law, in support of my position,
19 is whether there is any function at all for the law
20 in the control of drug use.

21 And if there is a function for
22 the law in such a control, precisely what is it.
23 The philosophers that I have referred to, are John
24 Stewart Mill, Lord Devlin, and Professor H.L.A. Hart
25 of Oxford.

26 These men have been chosen, because
27 it appears these men are the most prominent philosophers
28 in this area.

29 Perhaps as a glimpse into the
30 conclusion I have ultimately reached on the basis

1 of these philosophers, and the actual properties of
2 the drugs involved, I might briefly say this: I
3 would recommend as criteria for an effective law on
4 drugs, that only those drugs which are physically
5 harmful to the individual should be restricted from
6 his use.

7
8 All drugs which are not physically
9 harmful to the individual should be readily accessible
10 to those people who are of legal age.

11 If the drug is physically harmful,
12 for example, the narcotic drugs, then I would recommend
13 that the law has a function to play here, but that
14 the function of the law is purely and simply the
15 prevention of people obtaining these drugs, and that
16 under no circumstances does the law have any punitive
17 function in the area of control of those drugs
18 which are physically harmful.

19 Mr. Chairman, perhaps there are
20 other people who would wish to speak. I have stated
21 a criteria which I wish to set down, and if the
22 Commission would approve, I would be glad to go down
23 to the Lord Nelson and make my detailed presentation
24 there.

25 THE CHAIRMAN: Well, this is
26 very helpful. This is precisely one of the questions
27 that I raised.

28 I would just like to address one
29 question to you, and I would be very glad to hear
30 other opinions on this.

1 Do you see the function of
2 the law in such a case, involving harm to the
3 individual, and we are not speaking of any other
4 harm at the moment, the possibility of social harm,
5 but the function of the law in such a case, as to
6 prevent people from obtaining the substance. Do you
7 contemplate any use of the criminal law to restrict
8 availability? That is, any use of the criminal law
9 with respect to trafficking, for example. How are
10 you to restrict, or how will you prevent people from
11 obtaining the substance effectively, causing harm
12 to themselves, without some advocacy of the criminal
13 law with respect to distribution?

14 What are your views on that?

15 THE PUBLIC: Yes sir. With
16 specific reference to the narcotic drugs, I would
17 recommend adoption of the British system, in which
18 the narcotic drugs are available to those persons
19 who are already addicted on a doctor-patient basis.

20 However, for those persons who
21 sell and deal in narcotics outside of that system,
22 there should be punitive function.

23 THE CHAIRMAN: Prohibition of
24 trafficking?

25 THE PUBLIC: That's right. That
26 applies only to narcotic drugs.

27 However, in the instances of those
28 drugs which are not harmful physically to the
29 individual, then there should be no prohibition
30

1 against the sale of it.

2 THE CHAIRMAN: I would like to
3 mention -- you mentioned Mill, you mentioned Hart,
4 and you mentioned Devlin. Do you recognize the
5 concept of, or the idea of society having right
6 to preserve itself, or to protect itself against
7 some alleged social harm? Do you recognize that?

8 Do you recognize that as a valid
9 criterion?

10 THE PUBLIC: To answer your
11 question, sir, this is what you might call the
12 nitty-gritty of the debate between Mill and Hart
13 on the one side, and Devlin on the other, namely
14 does society exist for the purposes of the
15 individual, or the individual for the purposes of
16 society? And on that question I line myself up with
17 Mill and Hart, and I believe that society exists
18 for the benefit of the individual, and there is
19 no such thing as intervening for the preservation
20 of society, unless there is also a threat, physical
21 threat to the individual.

22 THE CHAIRMAN: Is the issue
23 necessarily to be presented in terms of the society
24 for the individual, or individual for society?

25 Do you recognize this kind of
26 a value, that the existence of the very basis of
27 the society, and I don't mean the status quo or
28 a particular form of society, the existence of a
29 very basis of society as a support for the whole
30

1 life of the people, and as a support for experiment
2 and creative development, and everything, that if
3 that is threatened, for example, by threatening --
4 do you recognize the right or responsibility of
5 government to intervene by the law to preserve
6 society in that sense?
7

8 Not to preserve a particular
9 social system, or economic system, but the very
10 basis of society, existence.

11 THE PUBLIC: To preserve the
12 rights and interests of the individual, yes. It is
13 very hard to argue in the abstract.

14 If you were to give me a specific
15 instance.

16 THE CHAIRMAN: I gave you the
17 threat of conquest.

18 THE PUBLIC: I'm sorry, I didn't
19 hear that.

20 THE CHAIRMAN: I'm sorry, I
21 said the threat of conquest that would threaten the
22 democratic system.

23 THE PUBLIC: Well, even Lord
24 Hart on that position, said there is a freedom of
25 conscience that would allow the conscientious
26 objector out of the defense of his country.

27 And Mill and Hart would also
28 argue that position, I think, and it is one with
29 which I agree.

30 THE CHAIRMAN: Your position is

1 clear.

2
3 THE PUBLIC: Thank you.

4 THE PUBLIC: Dr. Lehmann wanted
5 to know what your concept of physical harm was.

6 DR. LEHMANN: Well, you said that
7 any drug that causes harm should be prohibited.

8 Now, what is physical harm? How
9 do we know that a drug causes physical harm, unless
10 we know first of all what we mean by physical harm?

11 THE PUBLIC: Well, for example,
12 as I understand cocaine, it appears to be one drug
13 which is almost inherently harmful.

14 THE CHAIRMAN: In what way?

15 THE PUBLIC: In the sense it
16 deteriorates the bodies functioning.

17 DR. LEHMANN: It is very vague.
18 I don't really know. Do you mean metabolism?

19 THE PUBLIC: Yes, precisely.

20 DR. LEHMANN: Well, I don't know
21 precisely.---

22 THE PUBLIC: As I understand it,
23 the normal practice of taking cocaine is to sniff it
24 through the nostrils, and in the process of sniffing
25 it through the nostrils, very serious damage is done
26 to the cells in the nostrils.

27 DR. LEHMANN: If it is done
28 carelessly, and too much. Not if it is done in
29 moderation.

30 THE PUBLIC: Then in that case,

1 sir, your opinion stands in opposition to those
2 sources which I have read, and I respect your
3 opinion.
4

5 But the difference between, say,
6 cocaine as I understood it before arriving at this
7 meeting, and marijuana, is that marijuana is not
8 harmful physically.

9 DR. LEHMANN: If it is taken in
10 moderation.

11 THE PUBLIC: Unless it is taken
12 in excess, and then the prevention, of course, comes
13 in preventing excess as opposed to use inherent of
14 the drug, which I think are two different questions.

15 THE CHAIRMAN: Yes, would you
16 like to use the mike?

17 THE PUBLIC: I would like to say
18 that in the question of non-medical use of drugs ---

19 THE CHAIRMAN: Why don't you
20 sit? You don't have to be uncomfortable like that.

21 I apologize.

22 THE PUBLIC: The non-medical use
23 of drugs is possibly harmful. This is something that
24 we don't know.

25 But the function of the law in
26 preventing the non-medical use of drugs is not to
27 prevent harm, because this is something which cannot
28 be ascertained. It is to reconcile the tendencies of
29 those people who will use drugs, whether they be
30 harmful, or not, in full knowledge of the fact that

1 they are harmful, with the prohibitionist tendencies
2 of those who are against the use of drugs.

3
4 It is simply that. And in this
5 conflict between those who feel that drugs should be
6 used, or should not be used, the law should take as
7 pacifist a stand as possible.

8 THE CHAIRMAN: Now, Mill makes a
9 distinction. If you have read him carefully, he goes
10 on to make a distinction for those who have not
11 reached maturity.

12 THE PUBLIC: Right.

13 THE CHAIRMAN: He said his principle
14 of free choice does not apply there.

15 Now, he said they have to be pro-
16 tected. What are the implications of that qualification?
17 What do you think is implied there, in the kind of
18 protection that are permissible?

19 THE PUBLIC: The kinds of protection
20 are not those that can be provided by prosecuting
21 those people who are exposing the young to possible
22 harm.

23 It is a protection that can be
24 attained by allowing those people who sense this
25 harm, to impress their opinion upon these young, and
26 presumably rather delicate individuals who don't
27 know about this harm.

28 And the way to most effectively
29 transmit this sense of danger, is not through laws
30 that make this danger somewhat controversial.

1
2 MR. STEIN: What about the whole
3 basis for the juvenile delinquency legislation, which
4 presumably is to try and avoid this prosecution
5 notion.

6 I am not getting into how effective
7 the actual procedures are that try to implement this
8 law, but where the notion is to look out for the
9 welfare of the youngster during these supposedly
10 tender years, without the prosecution, criminal
11 proceedings, and so forth.

12 THE PUBLIC: Certainly the welfare
13 of these youths should be looked after. And part
14 of this is the amount of time, for instance, they
15 spend watching television, as well as the amount
16 of time they spend in the streets stealing, should
17 be looked after.

18 There should be perhaps a law
19 to protect them from using television too much. It
20 is the same sort of thing.

21 MR. STEIN: What is the meaning
22 of that kind of legislation?

23 You see, because the question that
24 Mill raises, is whether or not there is an appropriate
25 role for the state to intervene, during the early
26 formative period, when a person still hasn't developed
27 the judgment, or where he could be perhaps -- his
28 judgment would be overly distorted by certain
29 influences.

30 He makes the suggestion the state

1
2 has some sort of a role here.

3 THE PUBLIC: Yes, it does have
4 this role, but it must be effective in this role.

5 MR. STEIN: You are saying a
6 critical word there. You are using "effective".

7 THE PUBLIC: Gentlemen, if I may
8 take up the question you are just asking, first of
9 all, Mill, applying Mill to the question of narcotics,
10 it seems apparent that what he would do is restrict
11 the sale and use of these drugs, which are not harmful
12 physically to those people who are of legal age, so
13 then you could find what your legal age is.

14 If you are involved in a question
15 of sex it might be twelve, or if you are involved in
16 voting it's sometimes eighteen, or if you are involved
17 in contracts it's sometimes twenty-one. So that is
18 sort of an arbitrary question.

19 But it seems to me, the really
20 important issue you are raising, is one which Hart
21 takes up in his criticism of Mill, and that is that
22 in earlier times when religion was considered to be
23 something which -- an area in which there was to be
24 no heresy permitted.

25 Any person over the age, as it
26 were, induced a younger person out of his religion
27 -- out of his own religion into another religion and
28 there was some kind of a social denunciation that
29 was supposed to fall upon this individual, which I
30 think is something that we recognize in our laws,

1 because we have criminal laws which punish the leading
2 into juvenile delinquency of young people.

3 So applying that fear of Hart's,
4 the narcotic situation, you would legalize the use
5 of narcotics for those people over twenty-one, at the
6 same time recognizing that there is a danger that
7 people over twenty-one would have access to these
8 and
9 drugs, will lead people of tender age down the paths,
10 astray, as it were, and you would have, as similar
11 to the laws on alcohol, you would have contributing
12 to juvenile delinquency laws, which prevent, and
13 punish people over twenty-one contributing to the use
14 of drugs by people under the legal age.

15 MR. STEIN: Do you feel this is
16 a practical kind of an alternative now?

17 THE PUBLIC: Not only practical,
18 but absolutely necessary.

19 MR. STEIN: Right. You feel it is
20 necessary?

21 THE PUBLIC: As I say, practical.

22 MR. STEIN: And implementable.

23 THE PUBLIC: The same as the
24 laws on alcohol are.

25 Now the laws on alcohol have their
26 limitations, right, but still to the extent that they
27 are practical, they should be applied.

28 Certainly, whatever effect they
29 do have, is better than no effect at all.

THE PUBLIC: I would like to ask

1
2 a question.

3 You talk about physical deterior-
4 ation, and I am wondering what kind of protection you
5 give to those who are going to be mentally deterior-
6 ated.

7 THE PUBLIC: Well, I don't really
8 distinguish the two to the extent that if you are
9 speaking of mental deterioration in the sense of
10 psychosis, and use of a drug, the original effect
11 is a chemical effect on the brain.

12 THE PUBLIC: What I am going to
13 state is that if you take a drug, let's say a kid
14 at the age of sixteen, takes a drug and, let's say
15 marijuana, and he enjoys it, and he thinks it is
16 great. So he continues to take it, and why is he
17 taking it?

18 From what I can understand, he
19 is taking it because he has emotional problems, or
20 something like this he is trying to get away from.

21 So is it not true then, that if
22 this is the way he is going to get away from his
23 emotional problems, not isn't that the way he is
24 going to try to get away from life? And what is
25 this world going to come to, if that happens.

26 THE PUBLIC: The answer to that
27 question depends on how many emotional problems there
28 are in this world.

29 You see, what I think you are
30 saying is, that there is nothing inherent in the

1 drug which is harmful to the individual, but if he
2 has an individual emotional, or psychological problem,
3 then the drug may be of some serious detriment to him,
4 too.

5
6 At the same time we have drugs like
7 alcohol, which when taken up by individuals with
8 psychological and emotional problems, lead them to a
9 thing called alcoholism, but that's not an argument
10 for illegalizing alcohol. It is an argument for
11 people who have problems that are emotional, and
12 psychological, and going to the root of the problem,
13 namely, going to the emotional problem.

14 THE PUBLIC: There seems to be
15 quite a body of opinion, that perhaps the use of
16 marijuana should be legalized.

17 And if this does come about, whether
18 it is a recommendation of your Commission or not, I
19 would urge you to consider making this a retroactive
20 thing, such as when the use of marijuana is legalized,
21 then as far as the law, and presumably a majority of
22 the citizens of the community are concerned, there is
23 nothing wrong with it, therefore there is presumably
24 nothing wrong with using it in the past.

25 And perhaps this is a very diffi-
26 cult thing to do, but I would suggest the state take
27 upon itself an automatic review of the state's
28 expense of all convictions for the use of marijuana,
29 or any other drugs that fall into the change in law,
30 and with the view of eliminating criminal records

1 that are presently held.

2
3 MR. CAMPBELL: On that point, I
4 would simply ask, I think there may be some confusion
5 about the significance of a criminal record.

6 One of the ways in which a criminal
7 record is an unfortunate thing to have, is you are
8 asked a question, for instance, by another country if
9 you are applying for a visa: Have you ever been con-
10 victed of an indictable offense?

11 Now, it could be that a criminal
12 record was eradicated, but a person might still be
13 in a position to answer a statement on an application
14 for employment, or an application for a visa, stating
15 "Have you been convicted of an indictable offense?"

16 How would you propose getting around
17 that particular problem?

18 THE PUBLIC: I would simply answer
19 no, since when the country to which I was applying for
20 a visa, let's say made an investigation, there would
21 be no record of this offense, and there is a very
22 good example taking place right now in Halifax.

23 A couple are applying for landed
24 immigrant status to get Canadian landed immigrant, as
25 they are holding jobs, I believe, or are certainly
26 promised jobs, I think Nova Scotia School of Art.

27 They are being represented by
28 Walter Goodfellow of the city of Halifax, and you
29 might want to look into the facts of the case.

30 It has been reported on C.J.C.H.

1 television last night, and the night before, but
2 apparently they have been living in a trailer on the
3 Maine-New Brunswick border around two months,
4 waiting for ministerial approval, since the husband
5 in this couple was convicted four years ago at
6 the University of Philadelphia, or in Philadelphia, of
7 possession of marijuana, which is a criminal offense.

8 And to obtain landed immigrant
9 status, they must of course admit having been con-
10 victed, and I believe before Canada will give them a
11 landed immigrant status they must get approval of
12 the Minister, McEachern in this case, and he hasn't
13 given it.

14 Now last night on the television,
15 C.J.C.H. claimed to have got an advance report that
16 they were going to be turned down.

17 Now the only facts of the case
18 that have been presented was this particular con-
19 viction for marijuana possession four years ago. Now
20 there is a very good example where this criminal
21 record, which many people would consider a very
22 minor and insignificant one, four years ago, are
23 keeping these people from getting landed immigrant
24 status, it would appear.

25 Now there is a very good example
26 of perhaps if the United States and Canada had
27 eliminated all these records, even if they had
28 answered "no", there certainly was going to be no
29 record of it to be found.
30

1 MR. CAMPBELL: But there is still
2 a record. For instance the record of the press.

3 THE PUBLIC: People in jail for
4 having once tried -- aren't there for smoking marijuana,
5 they are there for breaking the law.

6 If you eradicate the law that says
7 it is against the law to smoke marijuana, it is no
8 longer against the law still, but people who are in
9 jail, are in jail because they broke the law as it was
10 when they broke it, rather than because the law was
11 -- I mean, that is a weak argument ---

12 THE PUBLIC: It is a matter of
13 language, isn't it? If society decides it is not an
14 offense, and never should have been an offense, its
15 pretty easy to legislate it out of existence, both
16 in records -- obviously the press and microfilms, etc.

17 THE CHAIRMAN: What about the
18 people who are hanged under capital punishment?

19 If you want to, you know, really
20 worry ---

21 THE PUBLIC: This is something,
22 sir, we can't correct. Obviously someone who has
23 been murdered, as it were, it is impossible to
24 correct this.

25 And there have been legal, and
26 financial settlements in some of these cases.

27 THE CHAIRMAN: I would be interested
28 and there are a lot of lawyers present in this room,
29 and this has been mentioned to us, and we certainly
30 have to give consideration to the submission.

1
2 But there are many, many lawyers
3 in the room, and I would be interested in any precedent
4 of this kind. And the law has to be amended from
5 time to time, but the law does not necessarily imply
6 that it was what it was at a given time in the social
7 evolution.

8 And you know the law itself, how
9 is it to have any force, if its sanction is to be
10 suspended by the possibility of amendment. There
11 are very difficult philosophical issues here, but I
12 would be glad to hear any precedent for this kind of
13 thing.

14 THE PUBLIC: Well, without
15 mentioning any specific incident, I think we could
16 conjure up many incidences where there were political
17 ---

18 THE CHAIRMAN: Yes, amnesty.

19 THE PUBLIC: Amnesty, yes. And
20 in this case there would be a parallel situation.

21 THE CHAIRMAN: The amnesty though,
22 is blotting out the defense.

23 In other words, it is a forgiveness
24 of offense. We are talking about convictions under
25 an existing law.

26 As I understand it, amnesty is,
27 we have been guilty of an offense, but you are free
28 of it, blotted out.

29 THE PUBLIC: Then we are back to
30 this gentleman's point up here, that it is a question

1 of words, whether we are going to blot out the
2 offense, or whether we are going to say, "You
3 committed, or you did something which we now recognize
4 as wrong, and we will therefore forget about it."

5 I don't think any -- see any
6 importance of a distinction ---

7 MR. STEIN: One thing I have
8 noticed, is when this recommendation was made
9 to us, it was never made to us as something considered
10 as a general principle.

11 It is usually a special consider-
12 ation to be given to persons who have served time
13 under marijuana legislation.

14 THE PUBLIC: If you have ever
15 distributed birth control information, I suggest
16 you eliminate those -- and been convicted for it, I
17 suggest you get rid of those types of offenses.

18 MR. STEIN: What I am getting at,
19 is I find it a little strange the concern is only
20 directed to this one particular offense, although I
21 realize it is ^{the} one that maybe directly affects the
22 people that are presenting this position to us.

23 But there is a very illuminating
24 chapter in a recent report by the Oulmet Commission,
25 or Committee, that did a thorough study on the
26 whole question of the administration of criminal
27 justice, and they deal with the issues involved in
28 attempting to eliminate records of persons who have
29 been out of jail.
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You might find that of interest.
It makes some specific recommendations in there, which
we are also looking at.

THE CHAIRMAN: There is a general
proposal, I understand, to eliminate, maybe in bill
form. I mean, that is one issue. I want my reaction
understood.

The elimination of the record is
one thing. A statement that is deemed never to be
an offense, is another, right? That is all I mean.

I very much regret, most sincerely
regret that we have to leave this very helpful and
interesting discussion. But we are scheduled to be
back at 2:00 at the Lord Nelson.

Thank you all for receiving us
here, and helping us.

--- Upon adjourning at 1:50 P.M.

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COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

COMMISSION D'ENQUÊTE
SUR L'USAGE DES DRUGS
À DES FINS NON MÉDICALES

January 30, 1970
Lord Nelson Hotel
HALIFAX, Nova Scotia

COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

COMMISSION D'ENQUETE
SUR L'USAGE DES DROGUES
A DES FINS NON MEDICALES

BEFORE:

Gerald LeDain,	Chairman,
Marie-Andree Bertrand,	Member,
Ian Campbell,	Member,
H. E. Lehmann, M.D.,	Member,
J. Peter Stein,	Member,
James J. Moore,	Executive Secretary.

COUNSEL:

J. Bowlby, Q.C.,	Counsel for the Commission.
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RESEARCH:

Dr. Ralph Miller,
Dr. Charles Farmilo.

SECRETARY TO THE CHAIRMAN:

Vivian Luscombe.

January 30, 1970
Lord Nelson Hotel
HALIFAX, Nova Scotia

1 us, Dr. Morton.

2 DR. MORETON: My comments
3 are pretty general. This video-tape was per-
4 formed a few nights ago in an apartment. It
5 was done with minimum rehearsal, just to get
6 used to the equipment.

7 These young people have
8 been in a group psycho-therapeutic setting,
9 at the teaching hospital, as I have already
10 said, and the restlessness came about several
11 months ago, when they realized that talking
12 about problems in drugs was insufficient, that
13 they thought that they were to go further than
14 this, that they would have to do something
15 about this.

16 Their own idea crystallized
17 that they should have this "drop-in centre"
18 which they have been discussing on this tape.

19 They have been discussing
20 this realistically. They have put their ideas
21 to church groups, a youth agency here in the
22 city, and to the university, as well.

23 At the moment, so far, they
24 have put on a dance themselves to get some fin-
25 ancial backing, and there is a second dance
26 coming up as well.

27 They are adamant that this
28 drop in centre is urgently required, in this
29 area at this moment, and the major issue at
30 the moment is not so much a psychiatric background

1 as I see it, it is moreso a financial holdup,
2 Mr. Chairman.

3 I think the tape itself
4 explains their views. They are very knowledgeable
5 people. And this is the kind of situation that
6 has been going on many months. This group, as I
7 say, started literally last April and from that
8 I should think there are possibly twenty to
9 thirty strong.

10 They are very much aware
11 of the situation in the city and across Canada,
12 because one or two of them have travelled quite
13 a bit.

14 I leave it at the moment.
15 I have got some more people here in the audience
16 around me, that are on this tape, and are of
17 this group.

18 I feel, myself, extremely
19 pleased to be part of this. As they call me
20 a director, or an advisor, I think really and
21 truly it is more counselling that I do
22 rather than advising.

23 Their ideas are their own,
24 their knowledge is their own. I have learned
25 a tremendous amount from them, and I am sure
26 some of the audience also has picked up some
27 information as well.

28 I leave it open at the
29 moment. If you have any questions, Mr. Chairman,
30 or from the Commissioners, or from the floor, I

1 will try, or members around.

2 THE CHAIRMAN: Thank you.

3 MR. CAMPBELL: I expect
4 that the centre will probably, hopefully, sentence
5 those who expect it to be hassled by authorities;
6 it could occur at some stage.

7 DR. MORETON: I think we
8 could anticipate, not obstruction, but a careful
9 eye kept upon us by the establishment, which is
10 only right; but I think once the thing was
11 functioning and they realized what they were
12 up to was good, I think this would be acceptable.

13 I think this is a case
14 of people getting used to something new.

15 MR. STEIN: Are you in any
16 way able to shed some light for us, on what has
17 been in existence here before?

18 We have been made aware
19 of the various programs of this kind in other
20 cities, We have had, in fact, a number of
21 sessions with young people who are running such
22 services.

23 In Victoria, for example,
24 there is an organization called "Cool Aid"
25 and they made a very helpful presentation to us
26 there.

27 In Toronto, there is a
28 place called "The Trailer". Now, what I am
29 wondering, has there been, and I have the
30 impression that there was something of this

1 sort tried. It was called the "Digger House"
2 and it ran during the summer of last year, and
3 it didn't quite get off the ground, although
4 there were some kind of facilities made available.

5 Could you, and is this
6 in any way an outgrowth of the ashes of that, or
7 is it two different efforts going on simultaneously
8 in the city?

9 DR. MORETON: Well, quite
10 frankly, we are not setting up in opposition, or
11 anything like that.

12 This, I suppose, was the goal
13 set by the Digger House, which was extremely
14 successful.

15 The concept of the Digger
16 House setting, and I think my two colleagues
17 here will agree, was mostly to deal with the youth
18 as a transient, somebody that was passing
19 through the city.

20 These young people realized
21 that the problem does start here in the city,
22 and they are after the problem, trying to help
23 youth in the city.

24 The cities of Halifax and
25 Dartmouth. they have actually sketched what
26 they want to do, and you heard mentioned that
27 they wished to set up a counselling service and
28 ask for professional help as well, and also
29 extend it a little further, their services, as
30 being a half-way house, so that they can help out,

1 literally take the burden, not step in and
2 take over the place of psychiatric hospitals,
3 but take some of the burden out of the hospitals
4 at the moment.

5 So really and truly, this
6 did really come from the Digger House setting
7 they saw, which was a wonderful piece of work,
8 and unfortunately they had to close down.

9 THE CHAIRMAN: Yes, why
10 did they close down?

11 DR. MORETON: It was
12 university property, sir, and I think the place
13 was ready to be pulled down, so this literally
14 -- they had a limited time, a matter of weeks
15 before the thing came down.

16 MR. CAMPBELL: It would
17 seem fairly good local acceptance.

18 DR. MORETON: Yes, once
19 the thing was able to prove itself, yes, but
20 still very conservative people are -- and this
21 was still eyed upon as something of a project
22 with a little suspicion, I suppose.

23 THE CHAIRMAN: Had it
24 received any financial help from the government?

25 Was the Department of National
26 Health and Welfare supporting some of these
27 individuals?

28 DR. MORETON: I think, sir,
29 this is literally not the question for me. The
30 persons concerned with this project are actually

1 in this room, and they themselves are better
2 qualified to answer this.

3 We, ourselves, are trying
4 to get this thing off the ground by running
5 dances, and if possible, financial help by the
6 Provincial Government, or Federal help.

7 MR. STEIN: Has there been
8 an approach made to the Federal Government, by
9 your ---

10 DR. MORETON: Not as yet,
11 sir, no.

12 MR. STEIN: As the Chairman
13 just indicated, one of the sources of funds
14 that you should be aware of, is the Welfare Grants
15 Department, under the Department of Health and
16 Welfare.

17 They are at the present
18 time giving support for such projects in other
19 cities, in Canada, very identical to the kind
20 of program that you are talking about.

21 DR. MORETON: This is
22 something of course, that we have to pursue very
23 soon.

24 DR. LEHMANN: I am
25 wondering just how you manage to have such good
26 collaboration with the psychiatric services,
27 because the stereo-type of the psychiatrist
28 comes out here, he is an ogre, he is a head
29 shrinker, and worst of all, his knowledge lags
30 at least ten years behind.

1 All he can do is take
2 out an appendix, and so on.

3 Now that is fine for
4 personal opinion. The only trouble is, and I
5 frequently run into it myself,
6 I get a call from a centre, one of these valuable
7 services in Montreal, for instance, and they
8 have something -- they are fed up, they have
9 spent three nights and three days talking them
10 down, and they won't be talked down, and they
11 won't go to a clinic, and they won't go to a
12 hospital, and then they wonder what should they
13 do.

14 And we say, "Well, spend
15 some more time with them", and they haven't got
16 that time, and anyway they are too difficult.

17 Well, take them to a
18 clinic, or a hospital, they won't go, and I
19 don't blame them for not wanting to go, because
20 the attitude that is instilled in them is that
21 psychiatrists are terrible and idiotic
22 and they musn't go there because they will
23 be poisoned, and I don't know how we are going
24 to get around this.

25 DR..MORETON: That is not
26 a very simple thing to answer.

27 I still feel that the
28 concept these young people have, is that we
29 feel, and I feel, I thought of this, we feel
30 that possibly with this drug centre, with these

1 facilities, that we hope we share with university
2 people, public health people, with the establish-
3 ment, that these young people are like this, and
4 do require this amount of time spent with them,
5 could be coped with, because we are hoping we
6 can possibly have a few beds available for such
7 people, the chronic requires this treatment,
8 and this is what we are hopeful of.

9 We are hopeful that the
10 university will possibly bring in a resident
11 psychiatric helper, with their own training, as
12 well as help with this youth centre, and I think
13 this is possibly the answer to it, in time.

14 DR. LEHMANN: Would these
15 young people with their admirable initiative and
16 helpfulness, and unselfishness, would they accept,
17 or be capable of accepting any kind of training?

18 DR. MORETON: I am sure I
19 could speak for them. Yes, I am sure they would,
20 yes.

21 MR. STEIN: What kind
22 of -- perhaps maybe some of your friends there
23 with you, could answer this.

24 I have been interested in
25 getting an idea of the kind of self-imposed
26 regulations of persons starting these centres,
27 what they would like to see.

28 One reason for your lack
29 of funds, as has been put to us, is there has
30 to be demonstration to the funding body that this

1 program is going to be responsible and so forth,
2 and we have been made aware of the difficulty
3 because of the criteria of evaluating the
4 program there.

5 There are certain value
6 questions here that are usually brought up
7 as to the way the operation is functioning,
8 whether or not it has sufficient traditional
9 even bookkeeping arrangement. Now, what I am
10 wondering about, is have you given any thought
11 to the kind of criteria that you would like to
12 see used, in evaluating your own program, and
13 what kind of regulations would you see yourselves
14 setting on the facility?

15 DR. MORETON: So far, sir,
16 to answer that question, I am going to pass it
17 on quickly. This group elected themselves a
18 chairman, a vice-chairman, a secretary, and a
19 treasurer.

20 They have set out a
21 program for which we have copies here today, of
22 their criteria, and it is pretty rigid, and
23 it is available for your scrutiny.

24 They have gone further
25 with this, talking about various programs
26 that they wish to get into operation.

27 It has already been
28 printed. It is a program, or a little brochure,
29 if you like, which is available, or shortly
30 available for parents, with this particular

1 problem.

2 So this is just one
3 little topic, the financial side, which at
4 the moment is very low, and which is in the
5 hands of the treasurer,

6 They have various projects
7 which are discussed at a committee
8 meeting at least once a week under the leader-
9 ship of a chairman, and the various things are
10 brought to the chair, and elected upon, and
11 passed or rescinded.

12 So they have a formal sort
13 of body, and function as such.

14 Now, this has only been
15 so for the last weeks.

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1 MR. STEIN: One of the issues
2 that has again been brought to our attention
3 is that persons running these programs
4 make it very clear that they are trying to
5 create a different atmosphere for young
6 people who come and feel that they can talk
7 about their difficulties, whether they are
8 personal or drug related, and in some
9 communities there has been a very strong
10 hostility towards the youth programs because
11 it is felt they do not take a strong enough
12 stand against drug use.

13 You know, this is one
14 issue. And the other point that is often
15 made is that if it wasn't for the existence
16 of this drop-in centre, you wouldn't have
17 runaways.

18 Now, this kind of concern
19 especially in terms of the question of drugs
20 and the attitude of drugs, have you some
21 stated policy? Have the young people
22 evolved a policy on this question?

23 DR. MORETON: Yes, we have
24 sir. Clearly, I think, putting it very
25 very clearly and shortly, I think the policy
26 literally as in this case,
27 is information for a start, information to
28 the youth that come and inquire, realistic
29 information, not the strict rigid sort of "No,
30 you don't do this, you don't do that". And

with
also involvement is possible/parents if they
wish to seek help, if they wish to inquire
about anything.

This is the policy. In other words, this youth is trying to help youth and entice youth to come to them for help.

MR. STEIN: Well, not quite. If I can state the question more directly, how would the young people respond to someone who came to you for help, who was using a drug that is at the moment illegal in the facility? Have you thought about that question? How they would deal with this?

MR. HINCH: If they come to the centre with a drug which is illegal in any way, or that we feel is harmful to the atmosphere that we try to create with their co-operation, they would be asked to leave the centre immediately and then consideration be given at a later date as to whether or not they would be permitted back in, because we couldn't take the legal side of it, the law enforcement agencies would be on our backs too quickly.

But we would have to ask them to leave. Does that answer the question?

1 MR. STEIN: Yes. Would
2 there be any consideration of trying to work with
3 the people on the street outside of the facility?

4 MR. HINCH: Outside of the
5 facility? Yes. Right now we are operating
6 almost in this manner. We are operating on
7 street contacts, and we have had many young
8 people get off of drugs. It is just that if
9 we had a centre they would know where to go,
10 if they wanted to go somewhere, there is
11 no place to go at the present time.

12 DR. LEHMANN: How quickly
13 would they be asked to leave if it is felt that
14 the drug they were on would be harmful to the
15 atmosphere? Would they be asked to leave
16 immediately or would there be some considerable
17 effort made to persuade them to give up the
18 drug, for the time they would be there?

19 MR. HINCH: Well, if they
20 would be willing to give up the drug at the
21 time, then there would be consideration to them
22 staying.

23 DR. LEHMANN: Well, how many
24 hours would you spend trying to convince them?

25 MR. HINCH: Not very long.
26 We wouldn't be able to take the time.

27 MR. STEIN: Do you feel
28 there is a danger, given what you have stated
29 as the reality, if you had persons with drugs
30 in your facilities, the problem of course

1 is that if the young person feels that he
2 can't bring his problem to you and if his
3 problem in part is not necessarily drugs, per se,
4 but he is a drug user, will you be tagged with
5 the label of being anti-drug?

6 In other words, young
7 people will be saying you don't want to get
8 involved with they here, because they are very
9 negative about drug use. They are on the drug
10 and your situation as you just described it,
11 forces you, if you are going to remain open,
12 to be in a sense at least on a legal level,
13 anti-drug possession.

14 Do you see this as
15 something you can overcome, the problems centered
16 around here?

17 MR.HLNCH: Yes, it is
18 basically the people involved coming into the
19 centre would be quite understanding and
20 unfortunately there might be one or two individuals
21 that might not be as understanding and
22 therefore we would be unable to reach them,
23 but in consideration of the group as a whole,
24 coming into the centre, we have to be firm
25 with issues ---

26 THE CHAIRMAN: The
27 gentleman at the microphone?

28 THE PUBLIC: I would like
29 to know if an eighteen year old came to your
30 home and if you did help him, and in which way

1 did you do it?

2 MR. HINCH: Unfortunately
3 he did not show up.

4 MR. STEIN: Does your group
5 have any views on the question that we have been
6 hearing evidence and testimony on in the last
7 day here, regarding the present situation?
8 In other words, we would find it very interesting
9 to hear about your program. You have
10 inferred, what your views are on education.

11 Do you have views on some
12 of the other matters that you could give
13 testimony on?

14 MR. HINCH: On the legalization
15 of marijuana, we do support this. The
16 key dangers there are the impurities and through
17 government control, the same way as alcohol
18 is controlled now, I believe the marijuana
19 problem would be lessened, and there would be
20 less of a tendency to go on to other drugs
21 with marijuana if it is legalized because
22 one of the major reasons in my own opinion
23 that people do go on to other drugs, after using
24 marijuana is that it becomes unavailable.

25 THE CHAIRMAN: What
26 becomes available?

27 MR. HINCH: Unavailable.
28 The unavailability of marijuana. They will
29 use marijuana for a month, and then suddenly
30 find there is none available on the street,

1 and so they will say, "Well, if I can't
2 have marijuana I will have something else."
3 They can buy LSD or something.

4 MR. CAMPBELL: Could
5 you tell us something about the history of
6 drug use in Halifax over say, the last three
7 years? How has this phenomena developed,
8 the movement of drug use in various populations?

9 MR.HINCH: Well, about
10 three years ago/^{is} when it really began, and
11 it developed rather slowly at first. It was
12 minority, mainly older people -- when I say
13 older, I mean eighteen, twenty. And then
14 the youth broke/ⁱⁿ rather phenomenally in the
15 last year to two years/^{ago} and it is going down
16 into elementary level, with solvents and
17 glue sniffing and so on, and it also has
18 reached junior high school, and high schools
19 in the area, at a rather high percentage.

20 I am not sure of the
21 exact percentage, but it is very high in youth
22 now.

23 MR. CAMPBELL: Was there
24 a sequential pattern here? Was there a
25 pattern of glue sniffing followed by marijuana,
26 followed by acid, followed by marijuana, hash and
27 acid at about the same time?

28 MR.HINCH: There is no
29 definite cycle at a definite time, but the
30 most common would be to start with the solvents

1 and garbage ---

2 THE CHAIRMAN: What is
3 that garbage again?

4 MR.HINCH: Garbage is
5 gravol tablets, asthma relief, anything purchased
6 in a drug store, to get one high. Then they
7 turn to marijuana, and to LSD, and they return
8 back to marijuana after LSD or on to amphetamines.

9 DR. LEHMANN: The cycle
10 that you have just mentioned is very interesting,
11 it is also reported of course from many other
12 centres. As you pointed out, the sequence
13 starts with glue and solvents and what you
14 can easily get in the drug store, like gravol
15 and so on, and then marijuana and hash and
16 LSD. Now the sequence would be based on
17 availability. It is easier to get the
18 solvents than you can get the stuff in the
19 drug store, and then you get marijuana.

20 Well, here the difficulty
21 comes in. I understand at the present time
22 it is easier to get acid here than to get grass.
23 Now how would you explain that people first go
24 to grass and then to LSD and not the other
25 way around?

26 MR. HINCH: Well, at
27 first they are afraid of the LSD and marijuana
28 turns out to be the thing, and they will usually
29 wait until marijuana comes in.

30 MR. CAMPBELL: What about

1 speed?

2 MR. HINCH: Speed. Methedrine
3 has become quite common in this area, as well
4 as the other ones like dexedrine, which you
5 can get with prescription or methedrine
6 you can get quite easily in a drug store.

7 MR. CAMPBELL: Does it
8 strike you that you have a fairly uniform
9 distribution of speed use in the drug using
10 population or is it your impression that
11 various drugs appeal to particular populations?

12 MR. HINCH: Well, it has
13 been our observation that a person with
14 paranoid tendencies, speed would appeal to
15 them, in the same way that a person with
16 tendencies towards schizophrenia, LSD would
17 be a very appealing drug to them.

18 MR. CAMPBELL: Are you
19 in any position to have any theory about whether
20 speed is used more in the university level?

21 MR. HINCH: Strong in the
22 high school or the university, but it is in the
23 others as well. It is almost impossible to
24 generalize on this type of thing.

25 MR. CAMPBELL: But your
26 impression is that the speed factor is
27 increasing more rapidly in those who are out
28 of school?

29 MR. HINCH: Yes.

30 THE PUBLIC: I wanted to help
abit. You wanted to know about the pattern

1 of development of drug use. I have been
2 watching it for about four or five years.
3 It used to be that there was a very small
4 number as Mike put it, of "older people", eighteen,
5 twenty, twenty-one, at the point where so
6 little was known about it, that it is quite
7 possible and these people would tell you
8 you could walk up and down Spring Garden Road
9 smoking marijuana and nobody would know
10 the difference.

11 Now, about three years ago
12 I went to Montreal for about three weeks, came
13 back in September, which is sort of a crucial
14 month here, because what happened was that
15 all the university students who had been away
16 for the summer brought back some dope.

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And then about a year and a half, two years later, was a period when there was a good deal of mysticism. There was a group

1 that could have been thought of as seekers,
2 they were very in perspective with a lot of
3 ritual. The last thing in the world that the
4 drug taking ever was, was fun.

5 It would be taken in very
6 bad taste, to suggest that this was fun. And
7 then a year later, this aspect goes down, and
8 you have got a much more clearly recreational
9 problem, the types of populations that are
10 involved change, in that second and perspective
11 phase.

12 Perhaps many people could
13 be thought of as, well,
14 philosophically, literary, artistically inclined people
15 and then it moves from them, into people who also
16 play football and hockey, and things like this.

17 Is there this sort of
18 pattern here at all, this sort of sequence?

19 MR. HINCH: There has been
20 present, particularly this summer, and I know
21 there is an interest in mysticism, Buddhism, Zen,
22 Buddhism in particular, and oriental religion
23 and other facts of oriental society.

24 It was the key interest.
25 And a lot of them were there for kicks, but I
26 know this summer they were taking anything that
27 was given to them.

28 A lot of them didn't know
29 what they were throwing down their throats, they
30 just threw it down anyway, and this is quite

1 common.

2 THE PUBLIC: I think one
3 of the problems here, it was mentioned yesterday
4 particularly with reference to acid, these sort
5 of, two camps, the philosophical and religious
6 side with the Leary crowd and the (Ken Keesey)
7 crowd, the merry pranksters.

8 What happened, so far as
9 I can see it here in Halifax, the thing escalated
10 so fast within a period of three years, really,
11 that there are elements of both, and there is
12 a huge spectrum of people who get into trouble
13 who are not really in either camp.

14 They don't even know that
15 camps exist. They are just using the LSD and
16 sniffing, and other things. Largely from what
17 I could see last year for status purposes. So you
18 get the phenomenon of the development of Victoria
19 Park last summer, of fifteen, sixteen, seventeen
20 year old kids running around and saying, "I am
21 more stoned than you are." and this became a very
22 serious problem where kids were taking phenomenal
23 quantities of dope, and if you told them you had
24 done it one more, they would jump the ante.

25 And this kind of pattern, I
26 think, is probably the most dangerous reason that
27 I have seen given.

28 In fact, when challenged
29 on those grounds, they of course, would recognize
30 that as being status, but that is what became

1 clear to me at least.

2 Particularly in the
3 lower socio-economic strata, if you like, to
4 get into that type of polarization.

5 THE CHAIRMAN: I wonder
6 if there aren't any more questions for Dr.
7 Morton and his colleagues, we might release
8 them.

9 Since you are in the
10 program next, Dr. Watt, we might invite you to
11 come and sit at the table.

12 Thank you very much. You
13 had a very helpful submission.

14 Good luck with your
15 enterprise.

16 THE CHAIRMAN: Dr. Segal?

17 DR. SEGAL: Mr. Commissioner,
18 may I make two points this morning?

19 The points have nothing to
20 do, and do/^{not}relate to what has been said. I would
21 like to quote, for those who have not heard the
22 late news last night, or who have/^{not}happened to
23 have obtained an issue of the Montreal Gazette
24 dated January 29th.

25 From Ottawa, picked up by
26 Canadian Press, the Hon. John Munro said yesterday
27 that "If we find a significant majority ---

28 Let's start over again.

29 Health Minister John
30 Munro said yesterday, that "If we find that a

1 significant minority of the Canadian people
2 smoke marijuana ---

3 THE CHAIRMAN: First you
4 said majority. Is it not minority?

5 DR. SEGAL: It is minority.
6 "If a significant minority of Canadian people
7 smoke marijuana, we would be totally irresponsible
8 if we didn't legalize it."

9 Then the author goes on to
10 write. If the report of the government
11 Commission studies in drug use reveals widespread
12 use of marijuana, it should be legalized, even
13 if that involves some health danger."

14 THE CHAIRMAN: Who said
15 that, the last sentence?

16 DR. SEGAL: This was also
17 quoted from the Hon. John Munro. I have to
18 apologize.

19 When we walked in this
20 morning, the newsstand wasn't open, so we weren't
21 able to get a copy of the January 29th edition.

22 Mr. Chairman, may I make
23 another statement?

24 I would like to make a
25 comment on the problems faced by the people of
26 Nova Scotia in relation to their obtaining
27 information via the news media.

28 This morning's issue of
29 the Chronicle Herald is a prime example of this
30 case. The lack of adequate coverage of yesterday's

1 sessions, provides one of the greatest disservices
2 to the Nova Scotia community, that a newspaper
3 could provide.

4 And if this morning's
5 newspaper in relation to the tremendous amount
6 of information that came out yesterday, there
7 was, I have to admit, an excellent picture of
8 the Commission on the front page, and there was
9 also an article adequately covering Professor
10 Beach's presentation, which I found excellent.

11 But that was the only
12 coverage, except for an item on page 19, which
13 was the same article that appeared in the Mail
14 Star yesterday evening, outlining the Nova
15 Scotia Task Forces brief.

16 Now, this newspaper has
17 given the impression that the only thing it
18 has covered during the session yesterday, was
19 that Nova Scotia has a serious drug problem.

20 In the same newspaper --
21 I don't know whether this is poor timing, or
22 poor policy, or exactly what -- a letter to the
23 editor is printed in which a gentleman slams
24 into Mr. Stanfield on not knowing what he is
25 talking about, when he talks about marijuana.

26 There is a very, very
27 small notation on the front page of the second
28 section, outlining that Hon. John Munro will
29 attend a symposium dealing with drugs at St.
30 Francis Xavier University, but not outlining

1 any more, or any other information on this.

2 Then there is an article
3 stating that a teenager received a two year
4 sentence in Dorchester for the possession of
5 marijuana.

6 This individual is in
7 Liverpool. And another article toward the
8 back of the newspaper outlining that a teenager
9 in Kentville received a six month sentence for
10 trafficking, and for withholding information as
11 to the source of the drugs he was trafficking.

12 I personally feel that is
13 a very, very biased presentation of news by any
14 one newspaper, and since the Chronicle Herald
15 is supposedly the Provincial newspaper, this is the
16 type of information spread through the Nova
17 Scotia population, and this is the only comment
18 I had to make.

19 THE CHAIRMAN: Thank you,

20 Mr. Watt?

21 MR. WATT: Perhaps I should
22 start by trying to outline the origin of what
23 is officially called the Halifax Youth
C 24 Communications Society.

25 Historically, it goes back
26 to about this time last year, when a group of
27 local youth got together and discussed the
28 situation in Halifax the previous summer for
29 transient youth, particularly.

30 The situation being that

1 the cheapest place to stay in town was at the
2 YM or YWCA at four dollars a night.

3 And what was happening
4 was that transients passing through were crashing
5 on apartment floors, sometimes up to twenty a
6 night, in an apartment, in completely unsanitary
7 and uncontrolled environments, where they had
8 -- and there were increasing instances of venereal
9 disease, of drug use, and abuse, and no access to
10 information as to where to get help, if they
11 wanted it.

12 Now, what happened was
13 that three different groups approached the
14 Commissioner of Youth for the province, to discuss
15 this matter, and were brought together at a
16 meeting where it was decided to try and set up
17 a house in Halifax, along the lines of Cool Aid
18 in Vancouver.

19 And we entered into corre-
20 spondence with Cool Aid and with The Trailer and
21 with the YMCA organization in Ottawa and in
22 Montreal and in Winnipeg, CRYPT in Winnipeg.

23 Now, what happened was
24 that we officially became incorporated on July
25 the 24th. We got our official Federal tax
26 deductible receipt number on July the 1st.

27 We scrambled around and
28 did a considerable amount of digging in the
29 community, and through Dalhousie University
30 managed to get a house on Henry Street for a

1 period of two months.

2 The house was scheduled for
3 demolition on the first of September. So they
4 allowed us to use the house rent free, and they
5 supplied maintenance in terms of plumbing and so
6 on, free of charge.

7 We scrounged, begged,
8 borrowed, all sorts of materials like this. We
9 had eighteen beds altogether.

10 We purchased a washing
11 machine and a dryer that were already in the
12 house from a previous owner, and a stove, and
13 operated for a period of sixty days on a twenty-
14 four hour basis.

15 Because of the problems
16 of permits, boarding permits and so on, for
17 public health, we could only take fifteen people
18 a night, because we only had one washroom in
19 the house.

20 Now, what we did do, was
21 contact the YMCA to see if they would take our
22 overflow. As summer progressed, they began to
23 take in more and more, and by the time the
24 Canada Games came along, we were poor and they
25 were taking in twenty-five people a night, using
26 our mattresses, and the floor of the YMCA.

27 Now, to give some idea of
28 the amount of activity that went on during those
29 sixty days, I am going to quote statistics that
30 I had at the end of the summer, keeping in mind

1 that our emphasis was not on record keeping, but
2 on handling the individuals who came to the house.

3 We would rather sacrifice
4 bureaucracy and accuracy of statistical information
5 for the amount of time spent on that, and spend
6 it on something else.

7 For a total of 60 days,
8 if you count one person's three nights in three
9 units, a total amount of combinations were
10 1,307.

1 This covered a total
2 number of different individuals 519, in sixty
3 days. The number of meals served free of
4 charge, we asked anyone who came in the door
5 to donate a quarter a day if they had it,
6 if they didn't, fine, we would absorb this
7 loss, total number of meals served, 3,516.

8 Now the economics
9 involved here is that the Youth Agency supplied
10 salary to a detached youth worker to help
11 with the project, made grants at the end of
12 the summer, \$970 of which was diverted to the
13 staff member who had been working at the
14 house. We had a total of four staff
15 members, plus myself, plus persons and youth
16 involved in the society. This means that for
17 the staff members, other than myself, the
18 maximum paid out was, I think, \$350 for three
19 months work.

20 The hours involved full
21 staff and youth, for running the house at the
22 end of the week, we cut it back to sixty-eight
23 hours a week in the house, this is in the
24 house, not including the time spent outside,
25 charting down individual kicks and patching
26 up family problems. We had two telephone
27 lines, one open for twenty-four hour a day
28 emergency calls and we had, at a rough guess,
29 about twenty-five runaway problems. Most of
30 these runaways were sixteen or over, and therefore

1 legally they are not runaways, but usually the
2 emphasis came from parents looking for their
3 children, and what we did in this case, was if
4 we could find them, we would talk to the
5 children and discuss the situation with them
6 and try to get them to at least let their
7 parents know that they were all right.

8 Now we did not try to
9 ship them home, but just tried to put them back
10 in contact with their parents. In no case
11 were we prepared to go beyond the willingness
12 of the youth involved. In all cases he
13 was consulted as to what he wanted to do.

14 Now the sort of patterns
15 of transients involved here, we had a total
16 coming from Canada of 406. Of that number,
17 130 came from Nova Scotia, 108 from Quebec,
18 and smaller numbers from New Brunswick and
19 Prince Edward Island.

20 Generally speaking the
21 problem was that from Ontario east was where
22 most of our transients came from, and from the
23 Eastern Seaboard of the United States. We had
24 a total of 108 people from the United States.

25 Now we didn't try to spend a
26 lot of time trying to track down where anyone was
27 going, but I would ask them, "Who are you, what is
28 your name, what is your age, what is your sex,
29 where are you headed, if you know." It was also
30 clearly understood that if they didn't want to

1 give that information they didn't have to, and
2 the only legal requirement was that if we had
3 a fifteen year old runaway, then we would allow
4 them to stay there the night, and contact the
5 police in the morning. We did not have a case,
6 to our entire knowledge, ^{where} there was a fifteen
7 year old in the house. We do know now
8 that there were fifteen year olds who lied
9 about their age, but we did not have a case
10 where we turned anybody over.

11 We had very good
12 co-operation from the police in this. They
13 agreed that they would not harass the house.
14 The R.C.M.P. agreed that they would not send
15 in a uniformed officer which didn't particularly
16 surprise us since we didn't expect a uniformed
17 officer anyway.

18 We had a sign on the
19 front door saying "No Drugs Allowed on the
20 Premises". And only once did it ever occur
21 that there was in fact drugs on the premises,
22 and this was reported within about -- my guess
23 is about three minutes and the person was
24 summarily put out of the house.

25 We found very good
26 co-op~~er~~ation from both locals and transients
27 in the house, but we did not insist that people
28 coming to the house be sober. We did
29 insist that they be able to behave even if they
30 were in such a way as to not distract ^{from} the function

1 of the house. In this respect, the biggest
2 problem we had with drug users were drunks
3 and they were not youth, they were demolition
4 workers from next door, and we had three drunken
5 Americans who came through in a car, who we
6 didn't allow in, because of the type of
7 aggression shown, so the distinction on the
8 drug basis was not in terms of the drug used,
9 but in terms of behaviour it manifested.

10 We found that the house
11 was not set up to counteract or aim at drug
12 problems as such. It was set up to provide
13 an environment where transient and displaced
14 youths, who for one reason or another, were
15 not living at home, ~~whether~~ they were kicked out
16 or had left voluntarily -- where they could
17 come and stay for a short period of time,
18 so they could get their feet on the ground
19 and have a chance to think about what they
20 were going to do, or where they were going to
21 go, and thereby avoiding arrest for vagrancy.

22 At the same time we
23 discussed with the City Police the problem of
24 local youth hanging around the Spring Garden Road
25 outside here, ^{because} ~~those who~~ were employed by the
26 Lord Nelson Hotel, ^{said} ~~that~~ the police were sending
27 down someone every hour to move the kids away
28 from the building.

29 So after a discussion with the
30 police on this matter, it was decided that they
hang out at Victoria Park and that

1 there would not be police harassment providing
2 they behaved there, did not harass other people.
3 And this information was spread on the street,
4 and following that we found that the hang out
5 became Victoria Park, which cut down the conflicts
6 of the people passing. As far as what
7 happened inside the house, we found as much
8 as possible to provide any subject of interest
9 to the youth, we found the vast majority was of
10 cases where there was a problem to be discussed
11 it was not drugs but family problems, social
12 problems and medical problems, unrelated to
13 drugs.

14 In fact the discussion of
15 drugs in the house was not a constant factor
16 of discussion. A lot of other things like
17 pollution, like the disparity between funds
18 being ploughed into technology and
19 business, and funds being ploughed into human
20 interest areas.

21 This type of subject
22 was of interest to youth generally, and just
23 as predominant if not more so than drugs.

24 So that I would say as a
25 rough guess, perhaps 10% of the discussion in the
26 house was on drugs, if that. However, there
27 was a lot of things we managed to pick up,
28 because in having 519 different people, we
29 handled everything from youth who had
30 no place to stay in Halifax, because there is no
youth hostel, to the sort of classic hippy types

1 from New York City. Draft dodgers, deserters,
2 just kids on the road passing through. We
3 even had locals who were unknown to us at the
4 time, lie to us and said they were not locals,
5 they were from out of town, and the reason --
6 as it turned out eventually, and we found this
7 out from a phone call from a parent what was
8 happening, was that some of the local kids
9 came down just to stay in the house overnight,
10 to just/be there as an interesting thing to
11 do.

12 Less specifically with
13 reference to the relationship of the society to
14 drugs, there are several comments which are
15 the comments of the people who were in the
16 house, who took advantage of the facilities
17 and people who worked there whether members
18 of the society or not, keeping in mind that by
19 the time we closed up and took a rough count,
20 three nights in the last week, each night there
21 was sixty kids in that house.

22 This means that sixty
23 transients, sixty transients and locals, using
24 the living room for a jam session, the back room
25 for a jam session and the office for general
26 confusion. Some of the things that came out
27 were the types of relationships with parents
28 and specifically drug issues which seemed to be
29 of much more immediate interest to the youth
30 involved and the parents than the actual interest

1 in the drugs themselves. For example, some
2 of the things that we found was that drugs was
3 not a major point of discussion in themselves,
4 the vast majority -- in fact I can think of
5 no contradiction to this case -- kids said
6 that they smoked marijuana for fun, not for
7 any great religious or moral purpose, but for
8 sheer fun.

9 Also as involvement in
10 this type of project increased, drug use went
11 down, but as involvement ceased, drug use went
12 up, so the point being that where there is an
13 avenue for youth becoming involved in something
14 that is meaningful to them, then drug use
15 doesn't stop, but it goes down.

16 Now the reasons for this
17 are probably quite varied and we could make
18 some speculations on it.

19 In terms of asking the
20 people who were at the house, what effect, if any,
21 the house had on their own drug use, apart from
22 sheer involvement, here I am talking about
23 information, some of the comments came back,
24 were "We learn more about which drugs were
25 safer to use and in what circumstances."
26 Most said that their perspective on their own
27 use broadens them, that they got a more
28 sensible way to look at drugs. In some cases
29 this was as a result of the house, and in some
30 cases this was a result of the passing of time.

1 They were consistent in
2 saying drug use did not increase, nor did it stop,
3 but it did decrease for some, and the perspective
4 gained is that of a more informed head, really.
5 The learning that developed in this kind of
6 environment is the kind of learning you get
7 from contact with persons looked at as having
8 a different perspective, so that within the
9 house, at any given time, we had a fair number
10 of straights, a fair number of heads, a fair
11 number of weekend trippers, and a wide
12 range of youth from all social economic geographical
13 and family pattern backgrounds, and we
14 found that say, in the initial weeks we
15 would have twenty-five kids sitting in the
16 kitchen, where ten of them were French, playing
17 games of putting the local kids in a circle
18 on the kitchen floor and the local kid was not
19 allowed to get out until he responded to a
20 question in French, and this went on for hours
21 and hours.

22 This is the type of
23 activity that I personally found justifies the
24 whole project, just in that alone -- that you
25 get a vast number of kids interested in rapping
26 to other kids.

27 In terms of the surfacing
28 of drug problems, we found that the most
29 effective means was exactly that, kids rapping
30 to other kids, and that what progressed from
 there is that some of the local kids would

1 talk to some of the transient kids, discover
2 that the transient kid had a serious problem
3 with drugs -- for example -- most of the
4 problems were not with drugs as I said, but
5 this problem in talking with the transient
6 was getting him to the point, after a week of
7 talking to him, where he was prepared to
8 recognize that he had a problem and was also
9 prepared to go down to the Psychiatric
10 Out-Patients.

1 Now the kind of problem
2 that we run across in servicing problems for
3 adolescents is we can get so far, and there
4 is no facilities to handle drug problems of any
5 sort.

6 For example, we took this
7 particular case, who was a chronic glue sniffer
8 down to the V.G. Psychiatric Out-Patients where
9 it was stated that this person had chronic brain
10 damage but would benefit from a length of time
11 spent in a hospital and that this person was
12 not beyond saving. Unfortunately he was
13 from Ontario and not covered by Nova Scotia's
14 hospital insurance plan so we couldn't get him
15 into hospital here without racking up an
16 enormous bill for him so it was agreed that the
17 best thing to do would be to send him back to
18 Ontario, which he was prepared to do, to go
19 to hospital there.

20 Consequently we got in
21 touch with the City Welfare people, sent them a
22 written note asking that they not supply the
23 person with cash, they supply him with a train
24 ticket and consult back with us before allowing
25 this person to go back to Ontario, so we could
26 arrange for somebody to meet him when he got
27 off at the other end.

28 Since knowing the mental
29 state of the person involved, we were a little
30 afraid if he got on a train, he would simply just

1 disappear. Not because he would deliberately
2 mean to do so, but he just couldn't cope.

3 What happened is that he
4 was given the money, we were not informed, he
5 took a train, arrived in Montreal, and disappeared
6 and nobody knows where he is now.

7 So what we are running
8 across is the kind of bureaucratic problems of
9 the very structure, particularly for transient
10 youth, of different provincial regulations
11 with regard to hospitalization and mental
12 health.

13 Also we ran across a fair
14 amount of value conflicts, say, with some
15 members of social agencies in town, who felt
16 that the long hairs, transients, did not properly
17 belong in their offices. Now, as the
18 summer progressed and as the time is progressing
19 now, this problem is going down. It is
20 becoming less and less of a problem, but there
21 is still a great deal of difficulty in getting
22 help for anyone because there is just -- for
23 example, the Atlantic Child Guidance Clinic
24 handles kids only up to the age of fifteen.
25 Once they are sixteen, they cannot get help from
26 that agency unless they are a ward of the Courts.

27 There is at present no
28 existing social agency to treat youth between
29 sixteen and twenty-five in Halifax, for this
30 type of problem. There are things like the

1 Y.M.C.A. et cetera, which is not aimed specifically
2 at this type of problem, nor to my knowledge is
3 there any such thing in any Atlantic Province.

4 Dr. Moreton mentioned, and
5 it was raised by Dr. Lehmann, that what do you do
6 to get somebody psychiatric help. I went
7 down with this person to the V.G. Psychiatric
8 Out-Patients and the environment there is
9 simply not very conducive to^{the} peace of mind of
10 the person who has to wait two hours to see
11 a psychiatrist because there are cramped
12 facilities. There is a huge workload
13 for the psychiatrist involved and the kids
14 quite probably, I think, are fairly paranoid
15 about that kind of environment because they
16 are afraid of what is going to happen to them.
17 They are afraid of being processed. I
18 would put it in those terms.

19 I think the single major
20 factor that made the house a success was the
21 environment of the house^{it} was conducive to just
22 saying exactly what you felt. Not that you
23 were to go along with the gags, as we did have
24 many many arguments in the house on all sorts
25 of issues, but that you could say what you liked
26 and nobody was going to get particularly up tight
27 about it. I think this was one of the
28 major factors. We had a medical clinic
29 on Tuesday night run by Dr. Charles (Ground)
30 who is the chief resident of the Children's Hospital,

1 with all volunteers, plus a volunteer psychiatrist,
2 Dr. Kushner and he handles, I think there were
3 forty-two patients over the eight week
4 period, eight sessions, between six and eight
5 of those were serum hepatitis cases. The
6 vast majority of those cases were not drug
7 oriented cases.

8 The only questions to be
9 asked at that medical clinic were again,
10 "Who are you, what is your age, what is your
11 sex?", and we did not insist that the
12 person tell the truth. We did not demand
13 identification because we were solely
14 interested in getting medical help to these
15 people. On that basis we managed to
16 surface, by the admission of people themselves
17 who went to the clinic with problems that
18 they otherwise wouldn't have gone to a doctor
19 for, despite the fact that some of them had
20 their S.I.cards, some of them had local
21 doctors. They just did not wish to discuss
22 this personal problem with that doctor.

23 The difficulty now is
24 that again there is no medical clinic in Halifax
25 for adolescents. Again there is no psychiatric
26 referrals for adolescents who are above sixteen.
27 We don't have a building. We have applied
28 to the Federal Health and Welfare grants division
29 for a three year demonstration project.

30 The difficulty there is we have

1 been told from Ottawa that they won't know
2 until around April the 1st whether we are
3 going to get any money. That means that we
4 can't apply in the meantime to the Province or
5 the City, because we may wind up getting
6 everybody confused and wind up with either no
7 money or too much, which would burn us up
8 the first year, and we would not get anything
9 going after that.

10 Nevertheless we are
11 determined to proceed whether we get any
12 money or not. I believe that there are
13 typical problems in applying to Health and
14 Welfare, the types of measurement facilities
15 they want to measure the validity of the
16 project for whatever purpose and this is
17 something we have stated specifically in the
18 brief, that there will be a considerable
19 amount of confusion. And if that confusion
20 is not present, then we are not doing what
21 we intend to do, and we do not intend to
22 become yet another bureaucratic agency.
23 It is exactly the opposite of our intentions.

24 Our intention is to surface
25 people who have these problems, to surface
26 these problems and establish social agencies
27 and not to establish another social agency to
28 process kids.

29 MR. STEIN: Could I ask
30 you a question on this point?

1 One of the other things
2 that is confusing to various levels of
3 Government when they are trying to sort out
4 whether or not to fund an organization is if
5 they receive what appear to be two or three
6 or four requests for the same kind of service,
7 from what also may appear to be competing
8 groups. I am just struck by the fact
9 that you are apparently in need of funds,
10 The previous group, which I took it was in the
11 Halifax area is also in need of funds.
12 Perhaps this is too intricate and touchy
13 a question, but are you not going after the
14 same kind of moneys in the long run?

15 MR. WATT: Not really,
16 because Dr. Moreton's group is taking a
17 different slant, as he expressed, towards this.

18 Now, what we did last
19 summer was cover a vast range of activities.
20 If you like, medical clinic, psychiatric clinic,
21 twenty-four hour emergency, drop in, crash pads
22 and food, plus family and individual counselling.
23 Now the reason we decided to do this was to try and
24 topple all those against the advice of
25 organizations like Trailer and Cool Aid,
26 that this had never been done in Halifax before.
27 We wanted to demonstrate the fact that it
28 could be done and that it should be done.

29 Now, having once done that,
30 we do not intend to proceed in exactly the same

1 way next summer. In fact one of the aims
2 of our society is to get the rest of the
3 community involved with youth and we do not
4 intend to substitute for organizations that
5 are supposed to be involved with youth, but
6 aren't. To this end, we are trying to get
7 other organizations to work with an equal --
8 if less than equal basis, with youth, in
9 setting up -- for instance, at the Y.M.C.A.
10 we have asked them to take in the male crashers
11 for the summer and provide breakfast subsidized
12 by us, if we get the money for the food.

13 That relieves us of the
14 problem of people crashing in the house.
15 It allows us to operate more and more on the
16 basis of communications and not as a short-
17 term hostel. Because we see the short-
18 term hostel aspects of the house last summer,
19 if we do not get other people involved,
20 it is simply going to fold if we fold, if we
21 don't do it, and we are determined that one
22 of the major tasks of the society is to
23 make other organizations in the community
24 aware of the types of problems involved here
25 and get them involved in it, which, before our
26 establishment, many of them were not really
27 involved in this type of youth problem.

28 Now, I can see and I agree
29 that there are certain lines where Dr. Moreton's
30 group and the society seem to be heading towards

1 mutual purposes. We have discussed this
2 with the group and are continuing to do so,
3 because the one thing we don't want is to be
4 falling over each other. I can see that the
5 type of thing that they are interested in
6 is different than the type of emphasis ---

7 MR. STEIN: In what way?
8 I understand they are talking about a drop-in
9 centre and they are talking about a referral
10 service and a twenty-four hour availability
11 and I hear you talking about the same kind
12 of thing. I am not quite clear what the
13 difference is.

14 MR. WATT: As I understand
15 it, the difference is that they are prepared
16 to or attempting to establish somewhat of a
17 half-way house, as part of the program.
18 Now the twenty-four hour a day emergency
19 call can be arranged in consultation with
20 them. Either they are going to do it,
21 or we are going to do it. There is no need
22 of both of us doing it. On the other hand,
23 there may well be a need for both of us to do it.

24 MR. STEIN: Well, yes, there
25 are, and in Vancouver there are presently
26 six efforts of this sort going on and they are
27 also running into the same kind of problem.
28 They and many people in the community feel
29 they are right, the same, they feel there should
30 be a variety of spots in the community, each with

1 its own particular unique atmosphere, although
2 it is relating to the same general problems
3 that both you and Dr. Moreton have talked
4 about. But when it comes to getting funds
5 from Provincial or Municipal or Federal
6 Government, the problem becomes almost the
7 problem of, I suppose, vying with one
8 another for very limited amounts of money
9 made available for human resources. And I
10 am just wondering out loud here, with you,
11 whether or not some form of joint request
12 would be somewhat of a more effective way
13 of getting yourself launched locally or with
14 two prongs?

15 MR. WATT: The difficulty
16 is here again, the bureaucracy. Dr. Moreton
17 and his group, as I understand it. Perhaps,
18 you see, one of the problems we had was we
19 couldn't do anything until we were officially
20 corporated. This kind of problem of
21 getting funds in the first place, is important.
22 I agree a co-operative like this would be a
23 good idea.

24 MR. STEIN: I agree it is
25 a difficulty where you are developing a program
26 that may have some basic differences. One
27 other point you made a few moments ago that
28 I was a little surprised by was your apparent
29 assumption that one can only apply it one at a
30 time, sort of one to one level government

1 at a time. My impression is, again, once
2 they have learned of these programs in other
3 parts of the country, that they go after
4 anyone and everyone simultaneously until they
5 have the necessary funds available to run the
6 program. They don't sit and wait until
7 the different granting bodies have had
8 their budgetary discussions because they
9 would never get off the ground.

10 MR. WATT: I assure you
11 we have no intention of waiting.

12 MR. STEIN: You said you
13 were waiting until April until you heard what
14 the Federal Government would do?

15 MR. WATT: May I correct you
16 on that. They said they wouldn't do it
17 and they put us in a sticky situation. We
18 are trying to get other organizations in the
19 City like Dalhousie University Students Council
20 to become involved in this project.

21 Now the kind of proposition
22 I am interested in, in that respect, is that
23 I would like to see organizations like that
24 donate funds to the society with the agreement
25 that the funds be used to hire a Dalhousie
26 University student to work with the project.

27 It is this kind of
28 involvement I am going after now.

29 The problem is always one
30 of not knowing exactly what is going to

1 happen until the funds come through.
2

3 Now if we could have had the funds
4 picked up, got another house this year, but the
5 difficulty is we don't have any money to
6 staff it.
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1 In order to get the
2 money to stop it, usually most foundations and
3 governments ask that you show what you have
4 done.

5 Now, on this basis we are
6 using this report. Fine; one other way in which
7 this kind of program is being funded in Vancouver,
8 is that one organization has gone into franchise
9 work with a gas station. They are leasing a gas
10 station in town, and they are running it as a
11 business proposition, and they are getting income
12 in this fashion, and I have heard from the Cool
13 Aid people that they were thinking of craft
14 shops, in other words, businesses^{of}/their own, which
15 would provide an income.

16 Have you been thinking of
17 that sort of thing?

18 MR. WATT: Yes we have.
19 Our limit is bound by the number of people
20 involved.

21 For instance, the funding
22 last summer -- I mentioned the Provincial
23 Government's involvement, we had a large number
24 of donations from private individuals in terms
25 of cash and food and other materials, but the
26 major operating expenses, the food expenses,
27 were provided by youth organizations themselves,
28 and I am speaking specifically of rock
29 groups who played for cost only, and not at the
30 regular fee, they played at the YMCA and that is

1 what paid for the food, so in terms of cost
2 to the community for food last summer, it was
3 pretty minimal -- and I don't think it is fair
4 to ask rock musicians to support something like
5 that, because they are the ones who are losing
6 out.

7 They man the pump and
8 they shouldn't be expected to keep doing that.

9 There were some other
10 points that I wanted to make. We quite often
11 ran across, in discussion with kids and with
12 parents, family problems, and particularly in
13 relation to drugs, and in relation to kids
14 being involved, or even seen at the Digger House,
15 and we sat down and talked about how we could
16 summarize some of the types of reactions that
17 we ran across, and we started with individual
18 cases, and noted down the differences.

19 Generally speaking, it
20 was agreed that most kids and parents can talk
21 fairly objectively about other persons, but
22 block emotionally with members of their own
23 family.

24 It seems it is O.K. for
25 others for whom there is no emotional attachment,
26 to take risks, but not family or friends.

27 Here I am talking
28 specifically about such involvements as marijuana.
29 Local kids who came to the house, reported that
30 their parents were afraid of the possible associations

1 with drug users, and problem kids, and many
2 parents agreed with the concept that they wanted
3 somebody else to do it, not their kid.

4 Now, this abated somewhat
5 toward the end of the summer, when parents
6 began to realize that they could see the evidence
7 that the influence on their children was not
8 detrimental, rather that it would have been
9 otherwise.

10 This is not to say that
11 the same type of reaction is likely to occur
12 again.

13 Now, in terms of parental
14 relationships, we have run across various types.
15 One type is where parents feel that their son
16 or daughter has accepted their position with
17 regard to drugs, so much that they feel the
18 kid will never get involved.

19 The conclusion being
20 a complete breakdown of communication on this
21 topic, plus the strain, the letdown of the teenager
22 because he doesn't want to hurt the parents and
23 let them down, so in this case you find an
24 assumption on the basis of the side of the
25 parents, you know, "my daughter, or my son will
26 not get involved."

27 And I find this a very
28 common reaction, which puts strain on the youth
29 who is involved, because he knows as soon as he
30 surfaces that problem to the family, it is going

1 to hit the fan.

2 Now another form is
3 where parents feel that their kid is involved,
4 and is constantly stoned.

5 You get this reaction too,
6 to the point where the youth is seen as a drug
7 degenerate, and this is a pretty nasty situation.

8 Both sides get very up
9 tight, parents have lost faith in the son or
10 daughter, and the way of coping in this kind of
11 family problem is usually rejection on both
12 sides.

13 This is where you find
14 people leaving home, and quite often other members
15 of the family are used as intermediaries, either
16 by one side, or the other.

17 The third type, is where
18 parents are realistically suspicious, but they
19 are torn between their fear of youth involvement,
20 and at the same time, they realize that the
21 teenager needs to make decisions for himself.

22 This kind of strain is
23 periodic. It comes up occasionally. It seems
24 to run in certain family patterns, but the
25 problem of drugs comes up only occasionally,
26 centering around this kind of tension in the
27 fear involvement, and the -- sometimes it is
28 irreversible, sometimes the parents take one
29 position, sometimes another.

30 This is a fairly rare

1 experience in terms of the number of families
2 seen and contacted.

3 Most of them follow the
4 first two categories.

5 Of course, there is even
6 a more rare one, where both parents and son or
7 daughter share the decision making, not just
8 on drugs, but on other matters, where they
9 discuss things like if you are going to school,
10 O.K. what time should you be home tonight, where
11 there is an open discussion, with argument pre-
12 sented on both sides, and a reasonable agreement
13 is reached.

14 In this type of environ-
15 ment, the stress is put on integrity, so that
16 everybody knows where they stand. The emphasis
17 is put more on integrity with regard to making
18 that decision, than on following assumed patterns
19 of behavior, assumed on both sides, where
20 parents might assume that daughter thinks, or
21 son thinks that they should do this, or daughter
22 or son think they should do something else, and
23 communication collapses.

24 This type of relationship
25 seems to be very rare, but it is encouraging to
26 see.

27 Another type is again
28 fairly common, where parents insist that teenagers
29 follow their own values with regard to drugs,
30 and here I am talking about, "cigarettes and
alcohol are O.K., but don't you touch dope", to

1 the point where the communication is really
2 not communication at all, because it is very
3 difficult for a teenager in that situation to
4 raise a problem at all, and also difficult for
5 the parents to back down from their position.

6 What makes it even more
7 difficult, is that you get, within this sense only,
8 parents who fall into one or more categories
9 of attitude toward this, where you find the
10 mother has one position, the father has another
11 position, and what evolves out of that is a
12 three way battle, and this again is a relatively
13 common phenomena.

14 It is a rather nasty one,
15 because what happens, either another member of
16 the family is used as an intermediary, or you
17 get someone outside, such as social workers
18 or minister, or so on.

19 Now, we find when that
20 happens we get accompanying guilt and trauma
21 and so on, in the sheer fact that a social
22 worker, or psychiatrist, or minister is involved.

23 Kids want to draw a
24 parallel here, and I think it is a valid one
25 between the stigma of association with dope,
26 particularly with dope, and the ^{old} stigma of
27 association between psychiatrists and social
28 workers, that the only time you went to see a
29 psychiatrist was when you were crazy, and what
30 a horrible thing that was.

1 This kind of stigma is
2 still very much in the way of communication
3 between families, and even outside the family
4 they have this type of problem.

5 The function of a counsellor
6 in this case, is usually just to stop the bombard-
7 in a counselling situation,
ment of the teenager for a short time,/and say
8 O.K. this is what is happening, and put it out
9 there, and sit back and take a look at it.

10 In most cases of counselling
11 that we run across, they are not severe problems,
12 they were more or less normal adolescent problems,
13 and the difficulty was to get an objective look
14 at the situations that the kids get involved in,
15 and this is seen by the kids primarily, and
16 the counsellors, as not instruction that you should
17 do this, or you should do that, but just to
18 analyze what has happened, and clarify the
19 situation.

20 Now what that brings me to
21 again, what I mentioned yesterday, as being the
22 kind of crunch that is occurring now.

23 I get calls, and so do
24 other people who are involved with this society,
25 who are youth workers, from very upset parents
26 who are afraid that their son or daughter is on
27 drugs, and it becomes a very difficult problem
28 at that stage, to know what exactly to do, because
29 they always ask the standard question, "Should I
30 turn him in to the police?"

1 "Is he going to wind up
2 wrecked for the rest of his life? What do
3 these drugs do? How do I get him off of it?
4 Do you think anybody knows anything about this?"

5 These types of questions
6 come up again and again in a vast majority of
7 problems that I run across.

8 Now you can give information
9 as to what is known about the drugs, you can
10 give information as to youth sub-culture, but
11 usually what is lacking -- and this becomes a
12 point of contention -- is that the kids want
13 to be seen as individuals in their own right,
14 not as an extension of the family status pattern,
15 and that causes a lot of problems! Not just with
16 drugs, but with long hair, with everything else,
17 any type of behavior ^{that} / does not conform with the
18 attitude of the parents, and it becomes very
19 difficult to overcome that problem, except by
20 a long term follow up and consultation with
21 all members of the family.

22 And again, there you are
23 getting into structural problems. There are
24 just not enough workers to go around.

1 For instance, an example
2 of the kind of problem you are running across
3 here, the Canada Welfare Council put on a 24
4 hour a day phone number, for help from social
5 agencies, so anybody could call and find out
6 what social agency they could get help from.

7 I phoned them the day
8 after their operation started, and asked them
9 who they had to go and help with problems of
10 youth and drugs, and they said one person,
11 Allister Watt.

12 Now, since that time,
13 ^{have} we/extended the list a bit. But you see, the
14 kind of problems with this type of difficulty,
15 is that there are very few people aware of what
16 the drug scene is, to the point where they
17 feel any sort of confidence in, say, anything
18 with some sort of accuracy, apart from relying
19 on pamphlets and books.

20 I mentioned this point last
21 night. We just don't have enough people who
22 know enough to go around and help with the
23 problems that are occurring.

24 THE CHAIRMAN: Mr. Watt,
25 this has been very, very helpful indeed.

26 We have to leave around noon,
27 to go to Dalhousie, and we must hear from Dr.
28 Silverman before that, and I think that we should
29 call on him, but we will be back in the afternoon,

30 If there is any desire on your part to talk

1 to us about this, we would be glad to hear it.

2 MR. WATT: There are just
3 a few more things I would like to go over with
4 you, but that can be done this afternoon.

5 THE CHAIRMAN: Thank you
6 very much.

7 I call now on Dr. Silverman,
8 Political Science Faculty of the Prince Edward
9 Island University.

10 Would you like to be
11 seated at the table?

12 Yes, gentleman at the
13 microphone?

14 THE PUBLIC: Mr. Chairman,
15 before Dr. Silverman speaks, I wonder if I could
16 make three short points?

17 The first is that some
18 people may perhaps accuse me of having my own
19 hang up, but I have been here partly yesterday,
20 and partly today. I am sorry I can't be here
21 all the time.

22 My particular hang up is
23 I get quite fed up, quite up tight sometimes,
24 about the amount of time and the amount of money,
25 and the amount of air space, and the media, and
26 everywhere else and the amount of seminar agencies,
27 our welfare, education, the remedial situations
28 having to do with the problems of youth.

29 And my hang up, if you
30 want to call it that, has to do with trying to

1 switch that around, and get some people talking
2 about the possibilities of young people, because
3 I think that is part of the problem.

4 It has nothing to do with
5 whether they take drugs or not, as far as I am
6 concerned. There is a different issue.

7 Although I do think in the
8 long run it may have something to do with whether
9 they take drugs or not, and under what conditions
10 they take the drugs, and how they might behave
11 differently, depending on their growth and
12 development.

13 So I am really talking about
14 this thing called "personal growth and development".

15 I am merely suggesting to
16 this Commission, that perhaps one of your recommend-
17 ations might be to all levels of government, to
18 all institutions, to all people who work with and
19 serve youth, that they get their creative thinking
20 caps on, get off the negative side of their
21 thinking, of trying to provide remedial services
22 and get on to creativity of how they can provide
23 programs, projects, involvement and participation
24 which would turn kids on for their own personal
25 growth and development, without owing anybody
26 anything for that particular experience.

27 Now, I say that because
28 I am convinced if we provide this kind of
29 learning environment, where young people can be
30 what they want to be, where they can become

creative, then I am convinced that they are going to give an awful lot to Halifax, and Nova Scotia, and to Canada.

That is my first comment.

I am suggesting that we want more kinds of creative centres, creative outlets where poetry, music, film making, drama, art, these kinds of activities can be explored, can be tried without the darn stigma of failure, which is another big hang up in our society; that everything we do has to succeed or get a medal, or 100 percent.

I am looking at places where young people can turn in and turn on, whatever their thing may be, to find out what they are capable of doing, find out how they feel about what is going on around them, to find out what their sensitivities are to music, light, colour, sound, body movement, and so on.

I am suggesting that what has happened to many of us as adults when we are growing up through the systems, I will speak of myself, if I may, ^{is} that we have attempted to turn off nerve endings to our environment which have become, and made us much less sensitive to what is happening to us, and what is happening to other people, so I really believe that we are very much a dehumanized society, a depersonalized mankind.

I really think there are a lot of young people who would like to reverse

1 that trend, and they would like to reverse it
2 by doing it themselves, as to their surroundings.
3 And I would suggest centres where they can do
4 their own arts and crafts, and make things.
5 And then one other point of allowing this poetry,
6 allowing these places, allowing these arts,
7 allowing this film making to find some sort of
8 public exposure, some medium where people can
9 recognize what the possibilities are in their
10 sons or daughters.

11 You see, I feel strongly
12 that this nonsense about there being only half
13 a dozen geniuses in the world, is crap, and a
14 lot of nonsense.

15 There are geniuses right
16 in this room this afternoon. There are geniuses
17 in the coal mines of Cape Breton, where they
18 pick coal right now, three miles under the sea,
19 and the reason they have a pick and shovel is
20 because it was not a learning environment, there
21 was not a creative atmosphere, there were not
22 people who believed other than that they were
23 unable to make it when they were young.

24 So I will drop that.
25 and
26 The second one, /I'm sorry,
27 Dr. Silverman, for taking your time. May I
28 continue?

29 My second point, I just
30 wonder, having been impressed with the Commission
and the kinds of things which have come up from

1 the young people, and the adults, both pro and
2 con, I think it is healthy when what we are
3 feeling comes out.

4 Because unless we start
5 dealing with feelings, we are not going to be
6 able to do much with the facts.

7 And I am just wondering,
8 sir, if we are not -- and I am hanging this
9 balloon in the air for myself, and other people
10 in the audience, I just wonder if we could not
11 set up a legitimate key LeDain Commission in
12 Nova Scotia, with the same kind of format and
13 procedure, and method, and I am wondering too,
14 sir, if funds would be available from your
15 Commission to carry on, on a smaller basis, to
16 do the very same thing you are doing here in
17 Halifax.

18 But unfortunately you are
19 not able to do so in Sydney and Truro and
20 Kentville and Canning, and all these other little
21 villages, and towns, which are just crying for
22 this kind of opportunity at least to explore
23 the problem.

24 That is a question, more
25 than a proposal.

26 And my third point is to
27 support Al Watt and other people here, who have
28 been saying the same kinds of things.

29 I would like to assure you
30 that there are some other people, medical doctors,

1 psychiatrists, some people in social work who
2 are coming along with the same idea.

3 That is the need to sit
4 down, and come up with an organized format for
5 an adolescent centre.

6 I don't like the word,
7 "adolescent centre", maybe it will be a youth
8 centre.

9 This would be a kind of
10 help creative centre, ^a combination of
11 where people can get counselling, help on drugs,
12 be able to get people who understand the need
13 and what other people have mentioned.

14 I won't repeat them, but
15 I want it run by a kind of people who understand
16 young people first, and I will call for an
17 equivalency of heart and intellect, and not
18 the bloody reverse, where we have a thousand
19 million dollar intellect, and a five cent heart.

20 If anything, I would like
21 them reversed. But it seems to me they would
22 have to be at least equivalent.

23 And I think the central
24 core of that kind of creative help centre, which
25 would be sponsored by all levels of government,
26 which would be supported by all levels in the
27 community, and the essential part of that would
28 be the fact that the staff, the people running
29 it, would have to involve community, would have
30 to involve youth, would have to reach out

1 services, as well as living in services.

2 But the essential part
3 would be, the staff would have to understand
4 what the word "change" means. You have to
5 understand it is happening so quickly that
6 ^{is} nothing/static or permanent anymore, and that
7 change can be a good thing.

8 Thank you very much.

9 THE CHAIRMAN: Thank you.

10 Dr. Silverman?

11 THE PUBLIC: May I say
12 something?

13 THE CHAIRMAN: Excuse me.
14 Yes.

15 THE PUBLIC: I think what
16 Mr. Stein was sort of worried about, was an over-
17 lapping of the service between Dr. Moreton and
18 Allister Watt's group.

19 I think Allister has
20 brought out the fact that he is really concerned
21 with the older group of adolescents. Dr. Moreton's
22 group, if he is working with the young teens that
23 are sixteen and seventeen, will probably find
24 it very good, and a very open field to relate to
25 younger people who are having a lot of hang ups.

26 These are eleven, twelve
27 thirteen year old kids that are hung up, not
28 only on drugs, but on sex, family problems, a
29 whole lot of things, and I think they will
30 find themselves very much involved in this, whereas

1 Allister will be giving a creative youth centre,
2 as Mr. MacDonald has mentioned, on older teens,
3 and I don't think we have to worry about whether
4 there is an overlap or not.

5 And even if we do, it
6 doesn't really matter, because you are working
7 coordinating. We are going in a joint effort.

8 We are not trying to
9 have, you know, like two wars on opposite sides.

10 THE CHAIRMAN: Excuse me,
11 I think it may be inevitable that there will be
12 the development of several different types of
13 what we have come to call, innovative services,
14 and it might be of interest to you to know that
15 in Toronto there has developed a kind of community
16 committee to help co-ordinate and to exchange
17 information, and keep each other informed of how
18 these developments are going, and the problems
19 they are encountering.

20 And to try to mediate and
21 help the financing, and so on. So I would not
22 at all be concerned. I don't mean to meddle in
23 the developments here, but I wouldn't be anxious
24 about the development of more than one of these
25 at all.

26 I think in time, that you
27 may find you may want to develop a more
28 formal type of co-ordination, without this bureau-
29 cratic thing, which everyone feels must be
30 avoided.

1 I just mention this by way
2 of information. That is taking shape in Toronto.

3 THE PUBLIC: I also would
4 like to bring forth that one of Halifax's big
5 hassels has been with the news media, co-operation
6 between -- I will speak as a youth worker, between
7 youth workers and police, and hassling of youth.

8 These kinds of centres, you
9 know, everybody is going to get all up tight and
10 now the focus is going to be on them.

11 They are going to have a
12 hard task. I think they can do it because they
13 have the manpower, and they have the teams.

14 I think gradually, parents
15 are going to start learning more about drugs,
16 they are going to learn more about why there is
17 interracial problems in Halifax, and more widely that
18 there is poverty. And I think the young people
19 notice. And with the focusing of the two diff-
20 erent types of efforts that Dr. Moreton and Dr.
21 Alister Watt's group are going to bring forth,
22 plus some other people I am thinking of, this
23 will sort of come out.

24 Thank you.

25 THE CHAIRMAN: Thank you.

26 Dr. Silverman?

27 DR. SILVERMAN: Mr. Chairman,
28 I wonder, with the indulgence of yourself and
29 your colleagues, and recognizing the time is
30 running short ---

1 THE CHAIRMAN: No, I don't
2 want you to feel rushed.

3 We have to be at Dalhousie
4 at 12:30, and we will have plenty of time.

5 DR. SILVERMAN: I wonder
6 if I could stick pretty close to my brief.

7 I am not as closely
8 involved in day to day concerns, as most of the
9 witnesses you have heard.

10 THE CHAIRMAN: I am sorry,
11 doctor, you and I are both guilty of the same
12 habit.

13 You have got to pull this
14 quite close to you. I fade away from it too. I
15 am told often.

16 DR. SILVERMAN: I am used
17 to speaking without a mike.

18 I wonder if I might stick
19 somewhat more closely to my notes, my brief,
20 than most previous witnesses.

21 Mr. Chairman, members of
22 the Commission:

23 To date, much of the debate
24 over the posture that the law should adopt with
25 regard to the use of marijuana has been dominated
26 by the controversy between two groups, labelled
27 by one recent writer "marijuanophiles" and "marijuan-
28 ophobes" on the other.

29 At the extremes of the debate,
30 some have attempted to suggest that a new heaven on

1 earth will be established if only the pleasures of
2 pot were more widely, and fully, legally available.

3 At the other extreme, some
4 have presented a picture of widespread anarchy,
5 psychological and physical deterioration of the
6 individual, and a reign of nameless horrors if
7 the law in respect to marijuana were to be
8 relaxed.

9 Often, the focus of the
10 debate has been on marijuana itself, on its
11 allegedly beneficial or detrimental affects.

12 This occurs at a time when what
13 slender laboratory evidence we have at hand seems
14 clearly inadequate to support either of such hard-
15 and-fast positions.

16 Public confusion increases,
17 passions are inflamed, and the debate itself
18 becomes an increasingly controversial phenomenon,
19 independent of its substantive core.

20 I cannot claim any particular
21 expertise, either professional, or personal, as
22 regards the subject of marijuana. I am a member
23 of the vast majority of the population that has
24 not experimented with the use of pot.

25 I am neither a pharmacologist,
26 nor a psychologist, nor a medical doctor. In short,
27 it would be presumptuous of me to present argument
28 on the merits or otherwise of marijuana.

29 Certainly, then, in this
30 regard, nothing I could contribute would be more

1 than a very personal opinion, and I shall endeavour
2 to resist this temptation.

3 There is, however, another
4 angle to the problem. The question of how we deal
5 with the use of marijuana raises, as a specific
6 instance, certain problems which are presented in
7 more general form in regard to the overall movement
8 for what is popularly called "law reform", and
9 what I would prefer to call the periodic review
10 and revision of the law of the day.

Later some presumptuousness is implied. Certainly one hardly need raise this question before a Commission chaired by Dean LeDane. However, I am emboldened to do so by two considerations: first that however aware the members of the Commission may be of this point, the Commission Hearings also perform a function as regards to a more public discussion but I think it is worthwhile to put a somewhat different viewpoint into the hopper for public discussion; secondly that as a social scientist, I can at least sketch in brief, some of the considerations as I am aware of them, and leave it to those learned in the law to carry on with discussion.

Basically I would like to raise two questions: at what stage and to what degree does the legal system become involved in dealing with a perceived social problem -- I am not saying social problem, I am saying perceived social problem -- and secondly, on what evidence are we justified in saying that a social problem as perceived, actually exists and exists in a way that involves invoking legal sanctions to deal with it.

The controversy over marijuana is in my view a touchstone of the general debate on this score at a time when more and more people are coming to believe that the legal system of the day should reflect

1 contemporary social perceptions and sensitivities
2 rather than relying on what might be termed
3 "societal inertia".

4 And I feel this is analogous
5 to the turn of the century when there was
6 increasing realization that the legal system
7 should be more involved in economic problems,
8 and this is not because the economic problems
9 had not existed before, but because there
10 was a change.

11 Often, when law is mentioned
12 in this regard, the view is presented that "support
13 for law and order" demands the maintenance of the
14 law as it exists at a given time in every
15 jot and tittle. Accordingly, the law-
16 upholders are very often found on the side that
17 would not see any changes in the specific
18 laws as they affect possession and distribution
19 of marijuana. I would suggest, however,
20 that much more is involved than maintenance
21 of the specific laws of the day. What is
22 involved is maintenance of a legal system
23 and of consensually-based respect for that
24 legal system as part of some at least
25 minimal structure for an evolving society.
26 To maintain this legal system is not a
27 matter of last-ditch stands on every point at
28 which there is substantive law in force,
29 as if to say that a strategy of law-maintenance
30 depends on the score of tactical victories.

1 Rather, it is a matter of careful review of the
2 situation, of what is happening in society and
3 what is happening in the legal sub-system,
4 of assessing one's resources for law
5 enforcement and setting some priorities for the
6 effective use of such resources, in the hope of
7 reducing the gap between the law system as it
8 exists on a day to day basis, and on the other hand,
9 the "ideal-type" of law system, viz. one that is
10 clearly articulated, rational, equitable in
11 objectives and methods, enforceable within
12 the limits of given resources, and founded
13 on as high a degree, as possible, of societal
14 consensus. Clearly, these criteria, taken
15 together comprise an objective that is never
16 completely attainable, but is, in my view, that we
17 should seek to move constantly in the
18 direction of the objective.

19 Specifically, I regard the law
20 on marijuana as it now stands as an unwarranted
21 and inefficient burden to society in its
22 efforts to evolve a total legal system that
23 would come closer to meeting the criteria
24 that I think a legal system should meet.

25 One aspect of the challenge to
26 the law as it presently exists -- both on the books
27 and in terms of the procedures for implementation
28 that have evolved around it -- is to question
29 whether the present laws constitute an appropriate
30 expression of the socio-political concern

1 as regards the use of marijuana. At what point,
2 and in what fashion, does society properly
3 become involved in the practices of individuals
4 within the society? Certainly now is not the
5 occasion to rehash the arguments of Mill's
6 On Liberty re: the tenuous balance between
7 individual choices, on the one hand, and social
8 responsibility on the other. We fully
9 realize that the maxim "prenez garde" was
10 almost always attached -- albeit, softly --
11 to the doctrine of laissez faire. In the
12 light of the experience of the last sixty
13 years or so, we have come to accept, and even
14 to encourage an active role for law -- an
15 interventionist role for the state -- going
16 beyond the narrow view that would confine the
17 institutions of the law to combatting force,
18 on the one hand, and fraud on the other.
19 Yet there is legitimate concern that social
20 responsibilities often swamp the individual
21 choice of the citizen, and this is exacerbated when
22 there is reason to believe that the instrumentalities
23 for such intervention have not been well
24 chosen. Instrumentalities of prohibition,
25 geared to combatting possession of a substance
26 by an individual may well present dangers of this
27 sort. Even a cursory examination of the situation
28 indicates that there are a number of categories
29 of activity to be differentiated, calling for a
30 variety of socio-political responses,

1 some of which may involve legal sanctions.

2 At the extremes, there are: a) Those activities where
3 the scale and/or intensity of danger to
4 society is considered to be so minimal as to
5 call for no form of social sanction, much less a
6 legal sanction; b) Conversely, those activities
7 where the scale and/or intensity of danger is
8 considered to be so great as to call
9 for societal sanctions expressed through the
10 system for administering criminal justice.
11 Here, an activity is prohibited and, if engaged
12 in contrary to the prohibition, is
13 subject to penalties.

14 In this simplified scheme,
15 between the two clear-cut poles demarcated
16 above, there is a middle range. Among other
17 possible categories, we might include in this middle
18 range; c) Activities which are neither
19 completely tolerated nor subject to
20 prohibition and criminal sanctions: here, society
21 contents itself with expressing its disapproval
22 (moral or otherwise) and, in some instances,
23 with providing procedures whereby an
24 individual who has been wronged can claim
25 damages. (Society disapproves of
26 slanderous talk; it provides procedures whereby
27 some recourse is available to the individual
28 who has been slandered.) d) Activities,
29 including those in particular where there
30 is the potentiality for danger to society and/or

1 the individual, that are subject to regulation
2 (food and drug laws; automobile licensing
3 etc., etc.). Here, outright prohibition
4 isn't the issue; regulation to see that use
5 conforms to some set of norms of prudent
6 usage, guarding against misuse, are established
7 and enforced.

8 The question that we are
9 facing is essentially this: Is outright
10 prohibition the proper response to the questions
11 posed by the use of marijuana in our society,
12 or does this fit into another situational
13 category, calling for another form of
14 response? If law is required, if there is some
15 possibility of misuse (as, say with alcohol,
16 or with motor vehicles, or with firearms) is
17 a system of prohibition the necessary and
18 effective answer, or is the societal
19 interest better served by a system of regulations?

20 Here, the question arises
21 of what sort of evidence is required for
22 us to make reasoned socio-political choices
23 that are reflected in our legal system?
24 A colleague of mine used to stress that
25 every decision is a matter of an existential
26 judgment, that no hard and fast rules can be
27 laid down, that general guidelines always have
28 to be modified by collective and individual
29 experience, and that decisions -- once made --
30 should be constantly subject to review and

1 modification, depending not only on new facts,
 2 but on new perceptions as to how the facts hang
 3 together. We must make judgments as to the
 4 saliency of a problem, the criteria for assessing
 5 evidence and the cumulative weight of the
 6 evidence. All of this involves perception
 7 and the weight of social opinion; the facts,
 8 in most instances, do not speak for themselves
 9 (cf. Thomas S. Kuhn's very provocative study,
 10 The Structure of Scientific Revolutions, Chicago,
 11 1962, which deals with the problem of how,
 12 and why, a scientific "fact" comes to be
 13 accepted as a "fact").

14 At one time, we believed --
 15 or at least some people believed -- that they were
 16 cognizant of the dangers inherent in, and entailed
 17 by, the use of marijuana. Consensus
 18 existed -- that is to say, consensus sufficient to
 19 put through laws, and negative consensus
 20 (lack of coherent opposition) to the putting
 21 through of laws -- sufficient to establish in
 22 Canada, United States and other countries
 23 the present system of prohibition. We
 24 believed we knew the danger, and we believed
 25 -- despite our experience with alcohol
 26 prohibition -- that we knew the remedy. But
 27 the weight of evidence -- that is, the cumulation
 28 of perception of the situation -- no longer
 29 seem to sustain this view, even if it does not
 30 sustain a view to the contrary. The Interim

1 Brief presented by the Canadian Medical Association
2 to this commission presents quite succinctly
3 a view as to the inadequacy of the evidence
4 that is by now, I believe, rather widely held
5 (CMA Interim Brief, November 6, 1969, pp.3-4,
6 9-11).

7 But if there is a breakdown of
8 the feelings of certainty as to fact, on which the
9 present legislation was initially based, where do we
10 go from here? A shift has occurred in the
11 arguments used by those who maintain indefinitely
12 a system of prohibition Few now argue
13 exclusively on the basis of the alleged
14 dangers of marijuana. Instead, the arguments
15 involved are two-fold; increased reliance
16 on the argument which has been propounded
17 for some time, that there is a causal linkage --
18 however protracted -- between use of marijuana
19 and use of hard drugs; and an increasing,
20 and relatively new, tendency to put the
21 onus of proof on those who advocate relaxation
22 of present laws, or legalization of
23 marijuana -- that is, to suggest that before
24 the present laws are changed, it is necessary
25 to prove that marijuana is safe (rather than
26 defenders proving that it is unsafe to a
27 degree warranting prohibition) and, even, that it
28 is a substance whose use is beneficial.
29 Admittedly, the last is provoked by
30 zealot "marijuanophiles" whose claims for the

1 substance are so extensive as to invite
2 the taunt "prove it". But the question is not what
3 is required in disputation, but what can law base
4 itself on? Positive proof is the only kind
5 of proof that can fairly be demanded in a
6 situation; if I am asked to prove that x does
7 not cause result y, I cannot really do so,
8 because no matter how many tests I run that turn
9 out negatively, the next one might turn out to
10 be positive. Our criteria for establishing when
11 something is "safe" are themselves matters of
12 judgment, and the law rests more comfortably
13 when there is clear evidence that x produces result
14 y that is regarded as so dangerous that it
15 must be prohibited than it does on the basis
16 of argument that suggests that so long as it is
17 not proven that x does not lead to y, one had
18 better prohibit x. In essence while the
19 "nameless dangers" and "possible end results"
20 arguments should lead one to make every effort
21 to continually probe experimentally while the law
22 is being revised, they cannot, in themselves,
23 provide an adequate base for the indefinite
24 continuation of legal provisions based on
25 "certainties" which are no longer regarded
26 as "certain". Ultimately, if the
27 credibility of legal provisions so based
28 is not to be placed
29
30

1 in complete jeopardy -- thereby placing some
2 overload on a legal system that needs all the
3 help it can get to cope with a period of rapid
4 change in social organization and attitudes --
5 some combination of revision, experimentation,
6 and feedback from the latter to the former,
7 is required.

8 So long as we maintain
9 the present provisions under the conditions
10 of uncertainty noted above, and noted in
11 other briefs, we are continuing to act as if our
12 legal system, including our system of law
13 enforcement, can function on a non-priority
14 basis. The need to look at law enforcement
15 and at legal sanctions in terms of priorities
16 has long been recognized: note, for
17 example, Bentham's arguments in favor of
18 differentiation of penalties -- parodied
19 in Gilbert and Sullivan's "making the
20 punishment fit the crime", and echoes in
21 Canadian Medical Association interim brief
22 (bottom of page 9). We may be coming into a
23 period of legal research, and, ultimately,
24 of legislation and law enforcement, where
25 priorities come to the fore, with the
26 combination of the kind of thinking
27 represented in the past by Bentham and Roscoe
28 Pound, and new instruments for evaluation
29 -- the computer, and a social equivalent of cost-
30 benefit analysis. The question will arise:

1 How should the resources available to society
2 best be used in the fields of promotion and
3 enforcement^{of}/legal order, justice, and equity?
4 One area in which we are already at a critical
5 stage is that of stretching out our law
6 enforcement capabilities to deal with an
7 expanding range of law enforcement problems.
8 As long as the problems outrun the
9 capabilities, as long as our police officers
10 are forced to cope with the whole bag of
11 problems without the sense of priorities that
12 is now demanded, then there will be a
13 temptation to out corners, even to enforce law
14 by non-legal or quasi-legal means.

15 And Mr. Chairman, this next
16 section I will just skip, simply saying that
17 the two things that I am concerned with here,
18 and I think I am sympathetic to the police in this
19 regard, because I think when they are given
20 a sort of overload kind of situation then
21 that is where I see a temptation, sometimes
22 exercised to move into a non-regular kind of
23 thing.

24 One is my concern that
25 laws have to deal with possession, necessitate
26 and can easily overlap into a type of
27 enticement. and into every type of enforcement
28 because as in the Courts, at any case which
29 is now appearing in Prince Edward Island,
30 the Courts simply decide that they cannot

the situation in
enforce the law on the basis of/which the
person was apprehended and so on.

Secondly, I am concerned, as other people are, with the dangers, when you have this mandatory system in this kind of law, of harassment arising in this quasi-legal exercise, sort of having a deterrent effect and they can't get everybody, so therefore we have an ambience in which we think stereotypic wise these practices exist. We will keep that on the edge of it.

And thirdly, this is one point I think I would like to just quote from this paragraph at the end of the section on the problems of law enforcement -- I will be paraphrasing from page 11 to 13.

Thirdly is the role of police as advocates and I don't want to restrict the role of police, except for the fact that they are servants of the law rather than makers of the law, but I think we should regard it as somewhat different since in most instances when police speak to the public, they extricate. For instance the breathalyzer test, and so on has been made available to the public.

In the case of marijuana laws, more so in the United States,

but to some extent
I have noticed in Canada, as well, that the
police have increasingly, though to a small

1 degree, have sometimes been cast as advocates
2 of detention and so on, and it seems to me
3 that this should raise the question of when the
4 police have to get involved in this way quite
5 sincerely, and while this in itself does not
6 raise the suggestion that - -

7
8 (Portion inaudible)

9 Now, I would just like to
10 read my conclusions, if I may. I am concluding
11 from page 13, following: I would like to emphasize,
12 however, that they are merely suggestions and
13 have not been worked into a comprehensive
14 structure of argument.

15 1) In my opinion, we should
16 be moving in the direction of legalization of
17 marijuana, but legalization subject to
18 certain procedures. Essentially, these
19 limiting procedures are as follows: first,
20 that the legalization process take place
21 in stages over a defined period of time,
22 subject to an understanding that full
23 legalization would not take place if, as we
24 begin to move away from outright prohibition,
25 there are significant and substantiated
26 findings indicative of dangers that may not be
27 substantiated at present; secondly, that if we
28 reach the stage of full legalization, the
29 cultivation, processing and distribution of
30 marijuana be an activity completely regulated by

1 government.

2 2) Essentially, I would
3 see the phases that we would go through as three-
4 fold:

5 First stage: the issuance
6 of instructions, through the appropriate
7 agencies of government, prohibiting the
8 use of those close surveillance and infiltration
9 procedures that have the danger of overlapping
10 into entrapment and enticement. This would
11 be accompanied by further extension of recent
12 governmental policies indicative of a more
13 encouraging attitude toward scientific
14 experiments aimed at establishing a body of
15 data about marijuana on the basis of which a
16 viable socio-political policy might be
17 established. The government should make
18 necessary research funds and facilities
19 available, as required, for this purpose.

20 Second stage: Modification
21 in the present law, changing the position as
22 regards possession of marijuana from that of
23 an indictable offense to that of a summary
24 offense; retroactive clearing of the books re.
25 the effects of suspended sentences. Extension
26 of "experimentalism" through procedures
27 for allowing limited legal use of marijuana
28 through designated agencies, and a procedure for
29 periodic check-ups and interviews to enable us
30 to expand our experimental data.

1
2 Now I have in mind here
3 something that we have seen in some provinces
4 with respect to alcohol where permit books
5 were widely available, so we had some sort of
6 control data before us, and as it turned out
7 the law was further modified for complete
8 accessibility through Government stores.

9 Third stage: Subject to the
10 findings resulting from the studies that would be
11 fostered by the policies suggested for the
12 first and second stages, the introduction of the
13 sale of marijuana through government
14 operated outlets analageous to those used at
15 present for the sale of alcoholic beverages.

16 3) One other point in favour
17 of a transitional period is that in all
18 probability, should change proceed as far as
19 regulated sale, there would be questions of
20 division of responsibility between the
21 Federal Government and the Provinces, as well as
22 a likelihood -- an analogy with present
23 distribution of alcoholic beverages -- that the
24 ultimate transaction would take place at
25 points of sale that would be under provincial
26 government control. A significant and
27 substantive variation from province to province
28 in the conditions under which marijuana
29 might be made available under government
30 regulation could produce anomalies and
variations in the legal system, as it affects

1 the citizen, that would , in their own
2 way, be as productive of dissatisfaction and
3 public criticism as some aspects of the
4 present prohibition system. Accordingly,
5 it would be advisable to use a transition
6 period in order to gain agreement among the
7 provinces, and between the provinces and the federal
8 government, as to basic guidelines for
9 legislation covering distribution.

10 I don't mean completely
11 uniform legislation, I mean compatible
12 legislation.

13 4) At some point the
14 question of price and taxation will come up should
15 there be a decision to place marijuana in the
16 "legal, but regulated" category . My
17 own preference would be that, in addition to
18 economic factors involved, the price and/or
19 taxation system to be established not
20 include factors related to governments'
21 desire to augment the general revenues;
22 rather, what should be reflected would be
23 costs of further research on use and abuse of
24 drugs and the funding of adequate medical
25 facilities necessitated by hard drugs.
26 At the same time, I would suggest that --
27 despite the inevitable loss of general revenue
28 that would be entailed -- governments
29 seriously consider shifting the bulk of revenue
30 from sale of items presently in the "legal, but

1 regulated" category away from the
2 general revenue, and in the direction of support of
3 such research and treatment facilities.

4 5) As regards the
5 transitional period, I recognize that according
6 to present parliamentary practice, it is difficult
7 for parliament to envisage this kind of program
8 of legislation, by stages, and with
9 coordination of feedback from experimentation
10 and experience with limited shifting of prohibition.
11 I would hope, however, that this would be
12 one of the substantive areas in which the
13 proposed National Law Reform Commission could
14 help delineate an orderly process of
15 evolution, in which Parliamentary action (or
16 rather -- for it depends on the will of
17 Parliament -- the possibility of Parliamentary
18 action) is closely related to a program of
19 scientific investigation and continuing public
20 inquiry.

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1 Mr. Chairman, I have a few
2 general comments here, and I would simply conclude
3 quoting a recent statement by a colleague of
4 yours at Osgoode Hall that "By far the most sub-
5 stantial problem confronting the law, is the need
6 to make its content to effect the collective
7 sense of justice in modern Canadian society" and
8 in his paper, it was at the Hot Springs conference
9 in November, Dr. Linden made it clear thatⁱⁿ/this
10 process, both lawyers and laymen, experts in a
11 variety of fields, and those represent that in
12 the Canadian consciousness will have to play their
13 parts.

14 Specific questions, this
15 is my view now, such as those entailed by involving
16 public policies regarding the non-medical use of
17 drugs, will be the platforms to which I would
18 draw reforms.

19 Generalities will not
20 suffice.

21 Your Commission, Mr. Chairman,
22 is to be commended for the energy and devotion
23 for which it has been tackling this job of giving
24 the public an opportunity to express its views on
25 this subject.

26 Thank you very much, Mr.
27 Chairman.

28 I realize I was running a
29 little close, and this was my first appearance
30 before a Commission of this type.

1 THE CHAIRMAN: I should say
2 now, we are very appreciable of the very thoughtful
3 study. It was very helpful.

4 I just wonder if it would
5 be at all convenient for you to return in the
6 afternoon? The members of the Commission would
7 like to question you, because there is a lot of
8 food for thought in that paper.

9 Would it be convenient?

10 DR. SILVERMAN: Yes, I
11 will be attending the session this afternoon.

12 If I could be called
13 earlier in the afternoon, it would help.

14 THE CHAIRMAN: What we
15 propose to do, is do it at 2, at the very beginning,
16 at 2:00.

17 Is that convenient, when
18 we reconvene at 2?

19 DR. SILVERMAN: Thank you
20 very much.

21 THE CHAIRMAN: Thank you
22 very much.

23 We are going to go in a
24 few minutes to Dalhousie.

25 There is a gentleman at
26 the microphone.

27 THE PUBLIC: I wonder if
28 I could ask a question to the man that was just
29 speaking please?

30 THE CHAIRMAN: Question of

1 Dr. Silverman?

2 THE PUBLIC: Right.

3 THE CHAIRMAN: Could you
4 speak a little more closely to the microphone?

5 THE PUBLIC: Sir, you mention
6 the argument, the legalization of marijuana might
7 lead to the use of heavy drugs.

8 DR. SILVERMAN: I mentioned
9 this argument has been made. I don't feel this
10 argument carries the weight necessary to continue
11 the present system.

12 In other words, I am
13 basically opposed to using -- I basically do not
14 feel that this argument is a valid one in terms
15 of the needs of the question of whether the law
16 should be reformed.

17 I just give it as an
18 example, as an argument ---

19 THE PUBLIC: Sir, what
20 are your views that perhaps today there is a
21 subculture of drug users and these people ought
22 to learn from their associates, that they should
23 use heavier drugs, and if marijuana was
24 legalized, perhaps there would not be a subculture
25 and therefore a heavier drug use would be kept
26 down.

27 DR. SILVERMAN: This is
28 perfectly consistent with my point, the implications
29 of my argument.

30 I don't see any significant

1 disagreement.

2 Perhaps I should have
3 approached my argument in terms that were simpler,
4 terms that had to deal with more specific points.

5 But I do not believe that,
6 you know, you are going to get a worse situation
7 than, say, the present situation with alcoholic
8 beverages, where a small proportion of those who
9 use, in terms of total use of alcoholic beverages,
10 still might prefer heavy use in an environment
11 and under social circumstances, and so on as
12 distinct, say, from prohibition of the 1920's
13 when we not only created a whole category, at
14 least in the United States, of people who were
15 criminals on paper, but we created a much
16 closer association between the average citizen
17 and organized crime.

18 I can't see any compatibility.
19 I suggest that perhaps you may have misunderstood
20 the purport of my argument.

21 THE PUBLIC: Thank you
22 very much, sir.

23 THE CHAIRMAN: Thank you
24 very much.

25 Well, I think perhaps then
26 that we should adjourn, and we go now to Dalhousie
27 University , in the Weldon Law Building from
28 12:30 to 1:30, and we will reconvene here at
29 2 P.M., when we have several submissions to hear
30 this afternoon.

--- Upon recessing at 12:15 P.M.

1 --- Upon resuming at 2:15 P.M.

2 THE CHAIRMAN: Ladies and
3 gentlemen, we apologize for keeping you waiting.
4 We have just come from Dalhousie, and we were
5 catching a bite on the run.

6 Now, I would like to resume
7 our hearing, and we have several submissions this
8 afternoon. Before turning to them I would like to
9 afford an opportunity to direct questions or
10 comments to Dr. Silverman, who presented a very
11 thoughtful paper this morning--for those of you
12 who weren't here--which analyzes the nature of
13 the decisions which have to be made concerning
14 the proper role of the law in this whole field:
15 what is the responsibility of government, what
16 is the function of law, and what are the criteria
17 for that kind of decision?

18 So we should have an
19 opportunity to follow that paper up with questions
20 or comments, and I would invite anyone, and
21 members of the Commission, or others present.

22 The gentleman at the back
23 there, could you come to the microphone please?

24 THE PUBLIC: The last
25 person who gave a little brief back at Dalhousie
26 raised the question about the philosophy of the
27 law, and you mentioned, I think it was Mills, and
28 I think he said the important thing was that the
29 government had a roll in substance, if the sub-
30 stance is physically damaging, and this is --

1 I wanted to speak out there, but we ran out of
2 time.

3 If this is going to be the
4 basis, then some chemical substances will be
5 accepted throughout the ages, at various times,
6 and are not considered illegal; for instance,
7 smoking which has certain physical damages, and
8 drinking, another substance, and there is caffeine
9 in coffee, and there are numerous chemical sub-
10 stances which are used, which can be physically
11 harmful, and the government has not taken the role
12 to outlaw these substances.

13 Now that gentleman
14 back at Dalhousie, his basis was that cannabis
15 is not physically damaging, and therefore it
16 should be illegal.

17 Well I think the question
18 is, rather than the government should take --
19 excuse me -- a stand on a substance -- I think
20 the question is even deeper than that, since
21 there are some things which are very difficult
22 to enforce, if not impossible.

23 For instance, prohibition,
24 there the substance was physically damaging, there
25 was a lot of campaigning against it, but once
26 the law became unenforceable, then the law had
27 to be reversed, rather than outlaw a whole segment
28 of society, and say these people are all criminals.

29 They just had to change the
30 boundaries, so that no longer is this segment of

1 society criminal anymore, and they are accepted.

2 So I think this question of,
3 "Is the subject physically damaging", I don't think
4 that that should be the criteria.

5 THE CHAIRMAN: Would you
6 care to comment on that, Dr. Silverman?

7 DR. SILVERMAN: Yes, I was
8 thinking, the young man basically was saying a
9 lot more things, perhaps in a more direct fashion,
10 than I said in my presentation, I think there is
11 a general point of law, and a part of society which
12 is much more complex in terms of layman's terms
13 and jurisprudence, I suppose I am more inclined
14 in experimental problemistics.

15 I think that almost every-
16 thing we do in society, every substance we use,
17 every kind of relationship including the kind of
18 relationship that society has traditionally
19 fostered, like marriage, have possibilities for
20 abuse, for danger, and so on.

21 Life is a matter of taking
22 risks. I see the role of government essentially
23 as recognizing world full of risk,
24 of lesser and greater degrees, widespread or
25 more concentrated.

26 The government should
27 attempt, where necessary, to go odds a bit in
28 favour of human beings.

29 Now one of my basic
30 critiques in terms of the "reserves allocation"

1 part of my presentation, is , I believe, that even
2 if we were told by those qualified to know that
3 the danger arising out of marijuana use, (which is
4 what I confined myself to), that there was a
5 danger, that this danger was appreciably higher
6 than the lack of evidence we have now, would
7 suggest that it isn't, and that it was fairly wide-
8 spread, that in effect we might be wasting social
9 resources, wasting legal resources, wasting
10 governmental resources by devoting to this problem
11 relative to something else that might be more
12 clear-cut.

13 In other words, if, as an
14 above 30 square, I am beginning to suspect rather
15 highly that I am not getting my money's worth
16 out of government, relative to social problems,
17 looking at the degree to which the law enforcement
18 agencies and other agencies are chasing the
19 era of marijuana with whatever slim evidence we
20 have, that there is a problem that must be dealt
21 with there, as distinct from other cases where,
22 you know, there is an alarm bell going off, it is
23 constantly telling us there is a social problem
24 and government says we don't have the resources
25 to do anything with this.

26 That is what I mean by
27 priority, I think we have to look at things in
28 terms of probability of risk, and priority of
29 social resources, and I am not suggesting that
30 this is an acceptable figure, but even if there

1 was a substance, say substance "X", a ten or a
2 twenty or a thirty percent social useage, and out
3 of the thirty percent of people who use this,
4 there might be a three or four percent incidence
5 where there were some effects which would seem
6 to be bad, and they were varied according to the
7 scale.

8 Our choice as to whether
9 to devote resources to this, would depend on
10 computing social problems that call for the use
11 of resources, and would depend again on our
12 perception as it is evolved.

13 In other words, if there
14 are a hundred people being killed on the roads
15 every day, and we feel on the basis of/ ^{our} study
16 that a greater number of traffic policemen might
17 reduce this risk, then I would rather see police
18 resources put into that, than put into chasing
19 after marijuana possessors, even if there were--
20 which I don't think on the basis of what has
21 been said--even if there were an identifiable
22 risk.

23 THE PUBLIC: Yes, it is
24 a certain evolving factor, the amount of the
25 risk.

26 DR. SILVERMAN: And the
27 alternative risk in alternative social
28 problems that are not being dealt with.

29 THE CHAIRMAN: Mr. Silverman,
30 do you see marijuana as a separate discreet thing

1 that can be dealt with -- distinct thing that
2 can be dealt with and analyzed, because your
3 paper is directed mainly, as I recall, to the
4 legal response of marijuana use.

5 DR. SILVERMAN: It's not
6 so much that, it is just that I recognize the
7 relative degree of my ignorance.

8 My ignorance with regard
9 to marijuana, is considerable. My ignorance as
10 regard to the other substance, is so bad as to be
11 legendary.

12 THE CHAIRMAN: Excuse me,
13 but what are your assumptions, if any, as to
14 harm, individual or social, underlying your
15 recommendations with respect to the legal treat-
16 ment of marijuana?

17 DR. SILVERMAN: My assumptions
18 basically, looking over the Medical Association
19 Interim Brief, in terms of people I talk to, and
20 in terms of anything I have seen, I don't think
21 that anybody is really coming out and saying that
22 there is a significant quality of hard data about
23 marijuana, indicative that there is -- indicative
24 of physical harm, with a high degree of incidence
25 among users.

26 I may be wrong. I just
27 get these things on a spotty basis, but it
28 doesn't seem to me that anybody is coming out
29 on this.

30 On the question of social

1 dangers, there I feel as a good scientist,
2 that if I could isolate one factor, and say this
3 one factor is productive of social harm of such
4 and such a thing, I think I could be doing better
5 than most of the greatest political and social
6 thinkers of the last 150 or 200 years.

7 In other words, I don't
8 think you can isolate a single cause of significant
9 social harm.

10 THE CHAIRMAN: But as a
11 matter of -- has the government a responsibility
12 to prohibit with criminal sanctions, the production
13 and distribution of thalidomide?

14 DR. SILVERMAN: I think
15 thalidomide was being advocated, was being
16 presented to the public.

17 THE CHAIRMAN: I am speaking
18 forcibly, with what is known about thalidomide.

19 DR. SILVERMAN: What I am
20 saying, is that with what is known about thalidomide,
21 and on the basis of judgments that have been made
22 as to its exceeding a threshold of danger, that
23 the government is justified.

24 THE CHAIRMAN: It is? It
25 has a responsibility to prohibit, with criminal
26 sanctions, the distribution of thalidomide?

27 DR. SILVERMAN: I'm sorry,
28 I think it has the responsibility to prevent the
29 distribution of thalidomide through the drug
30 store, and so on, and presumably if it was dis-

tributed any other way, it would be bootlegging.

THE CHAIRMAN: Yes, it would be, in effect.

You mean, in other words you acknowledge an appropriate rôle for the criminal law, in respect to that?

DR. SILVERMAN: Yes, but I would ask a counter-question, if I might, as to whether a woman who was in possession of thalidomide would be regarded -- as possession for her use, because of ignorance, or because she had set the risk of ^{it} above society, would be regarded as criminal?

THE CHAIRMAN: That is a valid distinction. I am speaking specifically of distribution, at the moment.

DR. SILVERMAN: I think when the judgment has been made that a substance is dangerous, and there are appears to be empirical results beyond the certain threshold, that is regarded as, you know, social dangers, then it is. However, if somebody were to come up with thalidomide strain 'B' or 'C', or whatever, in ten years, and sort of re-submit it and there were tests made, and so on, and it turned out that, let's say, the original bad results, resulted from an error, or so on and so forth, then I think it would be evolving.

I think we are constantly testing our assumptions back and forth.

1 THE CHAIRMAN: No question.
2 Now, to deal with your approach of probabilities
3 and the evidence, and we have the burden to prove
4 this ---

5 DR. SILVERMAN: I also
6 recognize that this is a part of the paper that
7 I am not really satisfied with.

8 THE CHAIRMAN: Yes, still
9 I think it is a very fine joinder of issue on
10 these questions.

11 Now taking the thalidomide
12 example, and the tragic experience: in
13 terms of your position, I understand that if the
14 government -- governmental responsibility has
15 been assumed to prevent distribution, or avail-
16 ability of harmful substances, and in that
17 implicit responsibility, I suppose, the government
18 must satisfy itself as to whether there is
19 danger by some accepted procedures.

20 They must call for tests.
21 Now what is the burden on government facing the
22 unknown, facing an unknown concerning potential
23 harm? What was the burden on government facing
24 thalidomide the first time? What is the nature
25 of that decision, what is the burden of proof,
26 and what is satisfactory evidence?

27 DR. SILVERMAN: It seems
28 to me, that -- I am not a statistician and so on --
29 it seems to me, that the burden of proof on
30 government, and people working for government, and

1 so on, is to set up what was thought to be, or
2 honestly had to be, sufficient criteria to test
3 this out, in a variety of ways, you know, going
4 through many ways, and eventually getting out
5 to the population and so on, that The real
6 issue on thalidomide, as I see it, was that it
7 was found -- as apparently it is now being found
8 with certain aspects of birth control pills --
9

10 I remember my wife was
11 involved in '62, the Serril Company then having
12 suspicions and referring back to --

13 Well pardon me, the burden
14 is that the government has to -- if things drift
15 out negatively, and there is positive proof,
16 then, to release it to a limited sample through
17 the doctors, and eventually make it publicly
18 available.

19 The real issue on thalidomide
20 as I see it, is that it subsequently turned out
21 that the testing was not stringent enough.
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1 The issue isn't . . . testing or not testing,
2 you see. The point is this: It seems to me
3 that what now we must be doing is joining to
4 the question of law reform, the question of
5 test of a substance whose use is apparently
6 widespread in certain segments of our society
7 to say the least, from at least on a one time
8 basis or sometimes more often, to join to this
9 what we assume to be a reasonable process of
10 testing a trial period, which is the period
11 I call the sort of "passbook" type thing.

12 But then to reserve to
13 ourself the possibility that if in widespread
14 use dangers appear that would change all that,
15 or that we may find that in fact a certain
16 substance, let's say substance x rather than
17 marijuana, that a certain substance is
18 generally safe or has minimal effects for the
19 population that somebody with a heart
20 disease simply shouldn't be taking.

21 Well, that we should know.
22 In other words, I think that the burden is a
23 question on government, the question of
24 honestly trying to assess and willing to make
25 a change if it turns out otherwise. Otherwise
26 we would be banning all kinds of substances,
27 all kinds of substances that do some harm
28 but where in the reasonable assessment of
29 legalness, it is only old-fashioned notion
30 or the notion of the 1930's and how someone

1 decides it is obscene, and the reasonable
2 judgment and the reasonable thing under
3 certain conditions is subjected to the problem
4 and we have to change our minds.

5 THE CHAIRMAN: Dr. Lehmann?

6 DR. LEHMANN: You would then
7 say, Dr. Silverman, that the Canadian public
8 was not justified in criticising the Canadian
9 Government for not protecting them against
10 the thalidomide casualty, because the
11 reasonable tests were used and all evidence
12 was in, it is harmless, and it is still a
13 harmless drug, except for pregnant women.

14 DR. SILVERMAN: I think
15 that the Canadian people were justified in
16 being horrified at this. At the same time
17 I would have thought that one would have
18 looked at special populations as well as
19 the general populations, as well as other
20 types and so on.

21 DR. LEHMANN: Anything that
22 reasonably now could be done, had been done.

23 DR. SILVERMAN: Right.
24 Anything that is reasonable gets done, and
25 often we make mistakes.

26 DR. LEHMANN: So there was
27 really no reason to hold the Government
28 responsible and yet there was, as you may
29 remember, an uproar in the press and the
30 Government had to introduce very stringent

1 regulations because of public demand on the
2 introduction of new drugs. So that now
3 researchers and physicians are very much
4 handicapped because many new drugs that are
5 quite promising and could be quite helpful
6 are not allowed until they have passed all
7 kinds of stringent tests.

8 DR. SILVERMAN: The
9 problem is, you know, that we are not devine.
10 We try to establish sort of a photostatic
11 equilibrium and we sort of swing between
12 extremes and so on. I think the question
13 typically in the terms of social change and
14 intellectual change that is going on today,
15 is to find some way so that the swings come
16 sort of progressively narrower. We may
17 have over-reacted. I suspect for example,
18 to get into just briefly, into a field that
19 is closer to myself, where I can speak
20 professionally, and that is, my real field
21 is international relations. This I have
22 got interested in, only as a citizen.

23 THE CHAIRMAN: Don't get
24 too modest. You are going to make the rest of
25 us feel uneasy.

26 DR. SILVERMAN: We may
27 find, and I am sort of horrified by the Viet Nam
28 War, I have been horrified by the Viet Nam
29 War for a long time. We may find that after
30 the end of the Viet Nam War, the United States
swings to a degree of non-intervention, of

1 complete isolationism. They may ultimately
2 be horrified by some of its results. Many of
3 the people who say the big danger now is --
4 you know, this is the way society works. It
5 burns its hands on the stove in one or more
6 instances, and then to some extent, it gets
7 scared of stoves in general, rather than making
8 that kind of error. We are not that
9 involved yet.

10 THE CHAIRMAN: There is
11 a gentleman at the microphone.

12 THE PUBLIC: I think what
13 the doctor has just said picks up my last point
14 where I think the role of government -- the
15 emphasis should not be on depression of the
16 drug, the emphasis should be on education and
17 research into the effects of the drug.
18 And if this had been the case in the instance
19 of thalidomide, then there wouldn't be any
20 blame on government. Now, the government
21 can take the stand also of not encouraging the
22 distribution of the drug, once facts are in,
23 once there is reason to doubt beneficial
24 effects. That is where I believe the
25 Government should be.

26 DR. SILVERMAN: May I
27 make a comment? This is why initially
28 the scheme at the end I made as conclusions
29 as an example, in a sense, that/one possible
30 way. This is one of the reasons why I favour

1 Government distribution and so on, because
2 I could see possibly more danger out of sort of
3 private competitive advertising, and this
4 isn't the philosophical position on my part,
5 because I sort of consider myself to be a mixed
6 economy guy. But I see more danger out of
7 sort of a variety of advertising with, say,
8 one kind of marijuana cigarette which is
9 perhaps slightly different, supposedly different
10 being advertised in terms of how it enhances
11 masculinity, and other things. This is the
12 thing of Marlborough Country. I have just, by
13 the way, changed my habit of smoking cigarettes
14 six or eight months ago. In other words,
15 I can see more danger to society in terms
16 of variety of false or semi-false images
17 or encouragement and so on even with
18 something that is relatively safe or might be
19 relatively safe. And for sort of corners
20 being cut due to the pressing of competitive
21 advantage might occur, from the series of
22 acts having to do with legalization itself
23 of the substance. And here again, I think
24 there is in terms, what little I recall of
25 the thalidomide question, that there seems to be
26 greater reason for society to be somewhat
27 horrified by the means by which the initial
28 manufacturers and so on of thalidomide sort
29 of pushed their product a little bit, including
30 pushing it a little bit with the testers,

1 then, just with the question of the testing.
2 I see no reason to open up a new alcohol set-
3 up, a new cigarette set-up with all kinds of
4 lures and so on, to increase business.

5 DR. LEHMANN: Just to set
6 the record straight, you mentioned several
7 times, that in the literature, for instance, the
8 Canadian Medical Association interim report,
9 you could not find any definite reference
10 to physical harm with marijuana. It is
11 usual in all medical reports, if the drug is
12 not used excessively, there is that
13 qualification. That of course goes for
14 alcohol too. Alcohol is a perfectly
15 harmless drug. If one old lady takes a
16 glass of sherry at Christmas time, it is
17 perfectly harmless, and it only becomes a
18 very harmful drug, if it is taken to excess.
19 And there is very suggestive evidence, that the
20 same will apply to cannabis.

21 THE PUBLIC: I accept this.

22 DR. SILVERMAN: The
23 reference really was accepted to indicate
24 an example. There is no sort of across the
25 boards for experimental things of this sort.

26 I think it involved some
27 sort of judgment as to what degree of our
28 population is going to be using a given
29 substance, alcohol or otherwise, to a degree
30 where some harmful effects are likely to

1 or may well occur on certain occasions under
2 certain circumstances. And then a judgment
3 on the part of government must warrant this
4 across the boards legislation for the whole
5 population, and if it does warrant across the
6 board legislation, then what kind of legislation?
7 I think we have got to get a very fine meshed
8 sort of system, some of the provisions of
9 health being made available for handling
10 sort of the routine functions of hooking up
11 information about, you know, measuring social
12 trends and hooking it up to decision making
13 may put us into a new era where we can get a
14 finer mesh, and ~~therefore~~ more quickly changing
15 ways of coping with social problems, than we
16 have had in the past. In the past we
17 have had to make legislation and assume it
18 might go on for hundreds of years. In the
19 past, when we had to make legislation, a
20 whole range of things had to be covered over large
21 categories. I think now we may be in a
22 position to make finer mesh^{ed} legislation to
23 cover very specific kinds of cases.

24 THE CHAIRMAN: Thank you
25 very much, Dr. Silverman.

26 DR. SILVERMAN: Thank you.

27 THE CHAIRMAN: I call now
28 upon Chaplain Fenske, Armed Forces Padre.

29 THE PUBLIC: Dr. LeDain,
30 could I ask a question to the Commission?

1 I think I was asking you this yesterday.

2 THE CHAIRMAN: Did you get
3 an answer yesterday?

4 THE PUBLIC: No.

5 THE CHAIRMAN: Do you think
6 you will likely get one today?

7 THE PUBLIC: I was asked
8 to ask.

9 THE CHAIRMAN: Well, let's
10 try it again.

11 THE PUBLIC: All right.
12 When and if the legalization of marijuana
13 comes out, will persons now holding criminal
14 records, will the charges be dropped against
15 them?

16 THE CHAIRMAN: Well, I have
17 forgotten what I said yesterday, but I don't
18 want to get caught in any inadvertent conflict
19 of statement. But first of all, when you
20 say will the charges be dropped immediately,
21 and, again you have spoken of convictions,
22 I assume you are speaking of persons who
23 have been convicted under the existing laws?

24 THE PUBLIC: Yes sir.

25 THE CHAIRMAN: My
26 answer doesn't apply whatever, with respect
27 to your assumption about changing the law.

28 Well, we have had this
29 question repeatedly actually since we have
30 been here, and I think we have to separate two

1 things, the possibility that the Government
2 might decide at some time to destroy central
3 records of conviction, criminal conviction.

4 And I understand there is a serious proposal
5 under consideration that criminal conviction
6 or records of criminal conviction should
7 be destroyed after a number of years.

8 I haven't examined it myself. I don't know
9 what its date will be, but this applies to
10 criminal offences generally.

11 That is one thing, destroying
12 the record. It is another thing to try to
13 obliterate the facts of conviction in the past
14 under the law. The fact of conviction
15 and the record of conviction are two different
16 things. The fact of conviction would
17 presumably remain even though there was
18 provision for destroying the record.

19 That would remain whether
20 one were convicted of an offence, and that one
21 would have to then decide how to answer that,
22 with the consequences which society attaches
23 at various levels, from qualifications for
24 office employment and so on.

25 In other words, the whole
26 social attitude is involved. It is just
27 not education in this field. It is the
28 whole response to conviction.

29 As to whether one could
30 in principle, assuming one was to recommend

1 changes in the law, the question of whether
2 one could in principle, as a matter of moral
3 sound principle in criminal justice and so on,
4 recommend that all offences in the past be
5 deemed not to have been committed and all
6 other convictions be deemed not to have
7 existed, that is another question. I know
8 of no precedent for this, and I am not prepared
9 to express any opinion at the present time
10 of what I would think of the matter as one
11 of principle.

12 The facts are that the
13 law was in existence, as was the criminal law
14 with respect to many other offences. I used
15 that example at Dalhousie University at noon,
16 what about the people who were condemned to
17 death before the abolishment of capital
18 punishment. There are many other cases
19 where the law has been changed in recent years.
20 Particularly we know of some where people are
21 formally convicted but they were convicted on
22 what then was the existing law.

23 If we are raising a moral
24 issue, let's raise it broadly across the board,
25 let us confront all the offences, let us
26 think of every offender, not just of offenders
27 who happen to be considered now, because
28 of the particular social importance and
29 relevance of this phenomena in the law. I am
30 sure that other branches of the law which have

1 been amended, could be considered to be
2 unjust and so on, by those who were affected
3 by it. Now, in other words, there is
4 a very important, moral issue here,
5 but it doesn't appear simple to me, and as I
6 say, I know of no precedent for this thing.
7 I mean it is different from amnesty as I
8 understand. Amnesty often applies to
9 political offences. The offences were for-
10 given. It is said the law won't apply.
11 It is not a question of obliterating the
12 conviction, the fact of conviction.

13 Now, I can't add any
14 more to your question. This is
15 about the fourth time I have answered it
16 since I have been here. No, I can't give
17 you anything more than that.
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1 The moral issue - it is
2 a moral issue which you and I and everyone
3 else has to grapple with. I think it is the
4 root of the laws since the time of
5 existence and the moral integrity of our
6 legal process.

7 I think if you will just
8 excuse me, I think I will call the Padre and
9 I am sure you will have an opportunity but I
10 trust that ^{this} / has been taking quite a bit
11 out of his time.

12 CHAPLAIN FENSKE: Thank you.
13 It is certainly a privilege to be here before
14 you. I was here this morning and listened
15 to some people who have worked with the
16 problem, some experts in the area of law.
17 I am not an expert in the area of law or any
18 other area, I am a Chaplain in the Canadian
19 Forces, and as such I am interested in the
20 young people. I work with them all the
21 time, and I am a full time counsellor in the
22 Alcohol Counselling Program in the Maritime
23 Command. As such I have become involved
24 in a real sense, with the problems that go
25 behind addiction and so on, and in this matter
26 of drugs, I find that the motivation is often
27 very similar between alcohol and drugs, and
28 marijuana and so on.

29 One of the things that
30 worries me is the sudden splurge and concern

1 over the drug issue. We forget that alcohol
2 is still the most basic drug that we have on the
3 market, not only on the market, but it is
4 exploited and pushed by commercial interests,
5 and there is seemingly no concern for this,
6 but this is simply beside the issue.

7 I am also a parent, and
8 therefore I am **very** much involved and
9 concerned with the whole thing.

10 Now, I would just like to
11 start off by making two statements. I would
12 like to begin on the premise that nothing that
13 a person does can be understood from the most
14 basic human motives, drives and needs of that
15 person; and secondly that the most important
16 aspect of our young people, whether they are
17 pot smokers, alcoholics, drug users, is not
18 their difference from us, but their deep
19 similarity in that they are struggling and
20 striving for the very same thing you and I
21 are struggling and striving for. So that the
22 real problem that we face is not so much
23 that we are suddenly turning, as I hear in
24 the papers and so on, a new corner in the
25 new era of drugs and so on, but the real
26 problem that we are faced with, in society,
27 is that we have fallen short in some of the areas
28 that we talk about, in our moral standards
29 and so on, that we have compromised with issues,
30 because that is the most expedient thing

1 and we have now let the young grow up in this
2 society and we expect them to take what we say
3 is right, but not to look at what we are
4 doing.

5 In this whole vast
6 range of knowledge and so on. I am sure that
7 is coming up, we don't really need any more
8 new effort. I don't think we need a whole
9 lot more new knowledge in order to deal
10 effectively with the drug problem, but what
11 we should begin to do is look very closely
12 at our community and see the resources
13 that we have in the young people^{and}/in the hands
14 from which they come.

15 Now, in listening this
16 morning, the speakers have been dealing with
17 solving, meeting these young people, helping
18 them with their problems and so on, and this is
19 good. I am involved in the alcohol program
20 in the same way, but in respect to alcohol
21 counselling, I am convinced more and more that
22 to be really effective, I have to move further
23 back until I come to the root of the problem,
24 and that is where we really ought to begin
25 and put our money, our knowledge, and our
26 concern.

27 Now, I would just like
28 to take a few minutes and just touch on some
29 of the things that we as a society and as
30 adults have done in producing some perfectly

1 good things. For instance, we push very
2 much as Canadians and as a Western Society, this
3 unqualified belief in free-will. We preach
4 about it in the churches, we speak about it
5 in the press and so on, and what I would like
6 to state today, is that we as a society have
7 used this free-will, as one person said,
8 as a wastebasket in which we dump all our
9 ignorance about young people.

10 In this way, you see, we
11 don't have to face young people and take
12 them seriously as persons. You see in this
13 problem of free-will we rationalize our own
14 attitudes of ignorance first. You see
15 feeling is nothing more and deeper and dynamic
16 / than this concern for free-will and so because
17 of this we turn to what will simplify human
18 behaviour and human motivation, and then we
19 make our young the scapegoats of this.

20 Now we forget or we try
21 to ignore the fact that unless free-will is
22 undergirded by responsibility and that it is
23 undergirded by a sense of commitment and
24 a sense of values, it becomes scurrilous
25 and this is something I think, that we are
26 running up against right now. I don't think
27 I am saying anything new, here, but the young people
28 feel vividly, they feel strongly about good
29 and about evil. We see young people in marches
30 and so on, and this is part of the good because

it is reflected in their concern.

They feel very intensely about whether they are the in-group and whether they are in with people, or whether they are on the outside and rejected, and yet when we really become serious, feeling must be focused and clarified, but then, you see, the primitive feeling of a child, the primitive feeling of an organism, is the diffused feeling of tension and often it is overly impressive and overly determined.

You see, just as poetry is more than a novel a person is more than just a conglomeration of drives and impulses. The important thing we often forget, I think, is that young people should be invited by us, as a society to express their basic feeling, to let them well up, and tell us what they really feel, and what they would really like to say, because you see, this is vital, because personality is not just an improvisation of feelings and drives and so on, but real feeling is a tenacious shaping, an integrator of these drives, and these forces, until that personality forcefully says what it wants to say.

This is the positive side of it, and I believe that in this train of thought, even the resentments which our young people have, which often come from

1 frustration, with many causes, and so on,
 2 that even such frustration and exasperation,
 3 that honesty can remove these young people
 4 into this break with so many stupid things
 5 that we do, because I think one of the shortcomings
 6 of my generation is that we have allowed
 7 this great capacity of rebellion against
 8 wrongs and injustice.

9 We have learned to live with
 10 it.

11 Now, during childhood,
 12 children learn to play with fears intensely
 13 and you would think they would kill themselves
 14 in the process, and of course this is good.
 15 Nature has given them this, it is vital for
 16 their growth and self-discovery, and vital to
 17 know how they are going to react in this world
 18 in which they find themselves. But when they
 19 grow up they are too old merely to play,
 20 and what shall they do then with this tremendous
 21 suppressed energy, and intensity which they
 22 have? They are not tired, like we are,
 23 they have not been working like we adults have
 24 and I don't think there is a reasonable
 25 alternative to this. It is vital, I think,
 26 that young people should be gripped by a
 27 strong sense of commitment, that they experience
 28 the thrill of a risk and a challenge,
 29 and our society has not provided ^{this} for our
 30 young people. If it has, it has it pointed

1 out and clarified for them, because as
2 young people they must have risk and challenge
3 and they must move beyond the risk of
4 flaunting the law with impunity and I think
5 the risk should take place in the area of
6 social concern and the very socially concerned.
7 But they may experience the risk as saying
8 and speaking out, even though they know
9 other people are against them, as being a great
10 need of doing something about it, of breaking
11 custom, reactions, when they are no longer
12 valid.

13 You see if risk is taken
14 in a positive sense, our young people are
15 encouraged to go into this area of risk,
16 then you see it can be understood as a
17 major driving force, But without this
18 risk and without this experience of challenge
19 and daring, our young people will not develop.
20 They will not develop as human being, because
21 youth is stopped in this type of risk.

22 Now we as a society in the
23 last twenty years have moved a tremendous
24 distance as far as personal involvement and
25 personal development is concerned. Perhaps some
26 of it good, perhaps some of it not good.

27 But I would just like
28 to mention two or three ^{things} / here. We have ushered
29 in the years of permissiveness. Our children
30 have more freedom: freedom of experience , at any

1 time in our history and I am very much aware
2 of this, but such permissiveness has not been
3 balanced in our society by a strong sense of
4 values, and behaviour in the home or the
5 communities in which our children grow up.
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10 We are very proud, especially
11 on our North American continent, that we have
12 rescued our children from the bondage
13 of labour and we guarantee them the basic
14 education, but we have not provided our youth
15 with the opportunity of creating expression
16 of this knowledge ⁱⁿ the time that they have on
17 their hands, to which they discover themselves
18 and develop a sense of vocation and personality
19 so that the result is a large section of our
20 youth feel idle, useless and dependent upon
21 their parents, against whom they would like to
22 rebel.

23 Now we have sponsored the
24 sex revolution, and I think this is all to the
25 good because finally we are beginning to free
26 the biological functions. And we
27 have relieved legal and moral sanction, but
28 the problem I am concerned with here, is not
29 that these steps are bad in themselves, they
30 are good. I think this is all to the good.

1 But now our youth
2 are finding themselves in a trap, because on the
3 one hand the new freedom has been desperately
4 sometimes resisted, by the prejudice and fear
5 of a community, while on the other hand these
6 very young people are being bombarded by
7 every conceivable sexual and erotic stimulation
8 for commercial exploitation. And I don't
9 think I am overstating this, when I am saying
10 this.

11 Now a person who has
12 attained maturity and independence on that,
13 can, I think, pick his way through and choose
14 a modern path through all of these pressures,
15 these changes and advances and build for himself
16 a reasonable life. But for young people
17 it is indispensable to have a coherent and
18 a very simple and viable structure in which
19 to grow into. Otherwise they become
20 confused and frustrated and rebel, and I feel
21 that the home is the primary structure to teach
22 these values and to teach these young people
23 and this home, this area of our society,
24 has been systematically undermined.

25 The adolescent finds
26 himself when he moves out of the home in another
27 society and, say he is forced to ^{know} / what his
28 peers say, he takes values from magazines,
29 and his tastes determinewhen he is in and
30 when he is out.

1 I believe that the basic
2 crisis that our young people are facing with
3 the new laws, can be understood basically
4 in terms of fidelity: to whom and to what
5 can I believe and can I commit myself?
6 I think this is the deep concern that they
7 have in their hearts. And I feel that
8 along with education, or vocation and social
9 opportunity, they need human relationships
10 with a person who can help them experience
11 their worth as persons to control their
12 behaviour. and So that they can begin to
13 realize who they are, the adolescent must be
14 able to ask genuinely, "Who am I?" and he must be
15 able to say this in full freedom and on his own
16 to his parents and to his peers and in the
17 community before he can ask the ultimate
18 question: "To what am I going to commit myself
19 in the life as I now live it?"
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1 What is forgotten and
2 ignored, is that behind the mask of rebellion that
3 we see, are real persons who are struggling
4 desperately, for some sense of self-esteem and
5 some sense of personhood, even as you and I
6 did, when we were that age.

7 Now in the struggle for
8 self-esteem, and personhood, our young people
9 are often unable to control their behavior, and
10 so in this area they need firmness as well as
11 friendliness.

12 You see, this is always
13 where we overplay our hand as human beings in
14 society. They need control as well as pleasure,
15 they need punishment as well as concern, and
16 because love makes demands, and it is not merely
17 understanding, concerning a form of friendliness
18 alone will not stand the test as young people
19 face the daily pressures of life around them.

20 They need limits set on
21 their behavior, and guidance in their structure.

22 But above all, I feel that
23 support and involvement with young people must
24 always contain that indispensable authoritative
25 quality, which only experience and insight can
26 give them.

27 This can only, and really,
28 be given in a home, by parents, as young people
29 grow up.

30 Now, the thing that con-

cerns me deeply here, and I suppose I speak as a parent, is that we have set almost a plot against the family.

If Russia, or China, had really wanted to break down our society, and had cannablis, it could not have been done more effectively, and that is whether it is the mass media, whether it is our schools, whether it is the churches, or whatever it is. On every side everybody tells us that it is the neglectful parents who are causing our children to err in their ways.

Well I would like to state, that I feel very strongly that our society today, the home of the parents, have been one of the most neglected areas of our society.

Because from every side, and in every way, people are talking about how useless and how almost detrimental the tastes and the values of the home are in making young people.

School teachers say this, ministers say this, in their sermons and so on, and if you would only, as parents, give us your children in the church schools, and so on, we would make them the type of person they ought to be.

And yet, in the very real sense, finally, the love and concern in helping the children to be persons, must be developed and take place in the home.

1 And I would like to say,
2 that in all our structure, in all our concern for
3 education, unless we really seriously take the
4 home and the parents into this confidence, and
5 bring them into the education program and into
6 the structural program, we are missing one of the
7 greatest assets we have, and we are missing the
8 real basic opportunity to go after the grass roots
9 of the problem.

10 Now, in my counselling, I
11 have found one or two statistics that are very
12 significant to this. Of all the young men that
13 come in for alcohol counselling, who have an
14 alcohol problem, over 83 percent of them come
15 from broken homes.

16 Now, to me, this speaks
17 very strongly on the place of the home, in the
18 development of a person, in his struggle for
19 maturity.

20 On the other side, I have
21 found that young people from 18 to 22 are the
22 most difficult to deal with, when it comes to try
23 to rehabilitate them from alcohol problems.

24 But it isn't until they
25 are married, and have a home, and so on, that they
26 really begin to take seriously their problem.

27 In other words, these
28 young people, unless they have some place, some
29 meaningful area in their life, some place where
30 they can push their energy and make it meaningful

1 for themselves, the motivation to turn away from
2 alcohol is very weak.

3 Now these two things have
4 stuck in my mind very much, and this is why I
5 have come here before you, as a supplement to my
6 brief that I have handed in earlier, to just
7 speak on these two areas themselves.

8 Thank you very much.

9 THE CHAIRMAN: Thank you
10 very much, Chaplain.

11 Excuse me, would you please
12 speak?

13 THE PUBLIC: Sir, if you
14 do rule with an iron hand, and you can't keep
15 your kids from doing what you don't want them
16 to, but you won't have their respect as much
17 as if you ruled them, and have them do what you
18 want for that respect, that they are giving you.

19 It is the same as in a prison, they
20 could keep control of the prisoners by an iron
21 hand, but they are not going to have respect.

22 And you can only keep the
23 control of them for a certain amount of time. After
24 they reach a certain age, where they are legally
25 allowed to leave, I think they would be much more
26 likely to leave if you were ruling them with an
27 iron hand, than if you were just giving them their
28 due right, and privileges.

29 CHAPLAIN FENSKE: I hope I
30 didn't lead off people to believe that I ruled with

1 a heavy iron hand.

2 I have two teenaged daughters
3 myself, and to try to rule them with an iron hand
4 would be a rather frustrating -- actually, they
5 are very nice girls and I don't want to rule them
6 with an iron hand in the first place.

7 But I hope I didn't say
8 this. What I am saying, and let me just give you
9 a little example, I have two energetic daughters;
10 they want to swim, ballet, they want to bowl, they
11 want to curl. One of them wants to be in the
12 drama society. They both are taking piano lessons.
13 They both like to go dancing every Saturday night,
14 and this is all to the good.

15 But you see, there are only
16 so many nights, and there is such a bloody thing
17 as homework.

18 Now, what do we do? So
19 we have to sit down and, you know, I have to use
20 my iron hand, and say, "O.K. you can only do so
21 many things. Now what do you want to do; you have
22 a choice of three. Take your choice."

23 Is that being a person with
24 an iron hand, or is that guidance. Because I know
25 they can't carry on a program of all this, and
26 still remain healthy.

27 THE PUBLIC: Well, if you
28 didn't punish them for things they do, if you
29 just showed that you disapproved, then when they
30 grow up, when they wouldn't have anyone to tell

1 | them what to do, I think that they would respond
2 | in a much more adult way.

3 | They would be more prepared

4 | ---

5 | CHAPLAIN FENSKE: Yes, I
6 | would hope so. This way I wasn't trying to
7 | suppress them, I was only giving them, I hope,
8 | deeper experience and wide experience to know
9 | what a human being can do, and if they want to
10 | have a long-term goal, I must, as a parent, must
11 | also -- you see, the first thing they require,
12 | you know you young people need free will, and you
13 | need your sense of personhood, but if I take
14 | you really seriously, and I also demand of you
15 | that you be the best possible person you are able
16 | to be too.

17 | THE PUBLIC: But do you
18 | think it is necessary to use force?

19 | CHAPLAIN FENSKE: I didn't
20 | say force.

21 | THE PUBLIC: You are talking
22 | about punishment.

23 | CHAPLAIN FENSKE: Oh, yes.

24 | THE PUBLIC: And parents
25 | being too lenient with their children.

26 | CHAPLAIN FENSKE: There
27 | are basic ground rules that we have to have in
28 | every home. I am a human being too. I expect,
29 | and I demand of you, that you treat me as a
30 | person, just as I would treat you as a person, and

1 that is one of the basic things, I feel, if
2 anything, you as young people have to learn is
3 to respect me too, even though I desperately
4 want to learn to respect you.

5 You see, I am human too,
6 I have hopes and dreams too. Most of them are
7 broken, but I still cling to one or two hopes.

8 THE PUBLIC: I was just
9 saying, I have seen both situations, and it
10 turns out much better if the child is doing it
11 out of love for the parent being good, than
12 from his fear of punishment.

13 CHAPLAIN FENSKE: Amen.

14 THE CHAIRMAN: Lady at
15 the microphone.

16 THE PUBLIC: I am the
17 mother of a convicted marijuana user.

18 I am probably a novelty
19 here, to admit it. But at any rate, I want to
20 take you up on that word about the home, and on
21 the parent.

22 And alcoholics and ignorance.
23 Alcoholics Anonymous is probably, if not the
24 best, a very good helper to change a person as an
25 alcoholic, because, this is one very important
26 step. The same alcoholic who helps another one,
27 has gone through the same things, has had the
28 same way and got rid of it, and got free.

29 We, as parents, even, and in
30 most cases, homes are not as bad as you make us

1 believe.

2 We, as parents, know
3 quite often what brought our children to the use
4 of drugs. In my case --- In our case we know
5 quite well.

6 And now we want to help
7 them, we want badly to help them, and we are
8 quite often not as dumb as some people think we
9 are. We are quite often able to, in every
10 respect. And after all, we are our children's
11 best, and absolutely unselfish friend.

12 We don't want anything in
13 return. We want to give them everything. But
14 we as parents, are extremely handicapped, because
15 we don't know how it feels to have smoked mari-
16 juana.

17 Would we be elated, excited,
18 would it be good, would we feel bad, would we
19 feel tired, or soothed? When would we like to
20 take it; when we are depressed, when we are down,
21 when we just want a kick, when we just want to
22 think; "Oh, the world is ours, the heaven is world,
23 the earth is white and the sea is green, and now
24 let's take it and let's all celebrate."

25 We have never experienced
26 that.

27 If a child, if a son or
28 daughter, is convicted of the use of marijuana,
29 and you stay and talk to your probation officer,
30 or to the judge, or to the policeman who arrested

1 your child, or whoever it is, and you are faced
2 with that fact, yes it is your own child, your
3 own blood, you stay there and you stand there and
4 you can't do a thing because you don't know.

5 Why aren't we given, as
6 parents, at least a taste of marijuana? It is
7 illegal. I can't use it. I can't do it. And
8 I hate my son to ask, "Where did you get that
9 stuff, I want some too."

10 But I mean this very,
11 very seriously. Give us marijuana, or the same
12 drug our child has experienced, and we can go to,
13 say, Maria, boy, dear Johnnie, "look I feel
14 exactly -- wasn't it nice, did you have the
15 same feeling?"

16 You get them to talk first
17 of all. You get him to relate his experiences
18 and this is, I think, a very important point.

19 I liked your remarks about
20 society relating, and talking to youth. I am
21 also on a County committee for youth development,
22 and it is absolute balogna because our adults
23 pretend only to listen.

24 We were at a public meeting,
25 and broken up into small groups. It was marvellous,
26 And when we came together again, and reported,
27 who were the first ones to object? The principals,
28 the teachers, the adults who belong to the Women's
29 Institute and United Church Women, and what have
30 you.

1 Immediately the youths
2 are turned off. And mind you, when we were in
3 the small groups we really got the troubles out.
4 I think what we have to do, is, beside what I
5 mentioned first about really smoking that stuff
6 or whatever you do with it, but that we really
7 have to be honest, and we have to develop this
8 confidence.

9 Where have you been in
10 your church? You have the adults my age, generations,
11 how come it is all gone? How come our youngsters
12 listen to us?

13 CHAPLAIN FENSKE: I am
14 sorry, I think I should not have worn my uniform
15 this afternoon. Somehow the military seems to
16 have affected everybody.

17 First of all, I deal with
18 my children with an iron hand, and then I sit
19 on parents.

20 I think, madam, you missed
21 almost half of the point of my brief, and that
22 is terrible, though not unusual. Most of my
23 sermons are misunderstood anyway.

24 But I agree with you, this
25 is, I think, and this came through to the gentlemen
26 of the Commission, that my concern that the family,
27 the parents be brought in and that they be helped,
28 because many a time when I was Chaplain in Shannon
29 Park, and there was some 900 families and 600
30 children piled into a small area;

1 The parents would often
2 say to me, "Padre, what in the hell do we do?"

3 And just as agonizing as
4 that.

5 Because everybody thinks
6 they have got the answer for the children, and
7 the parents are left out. "If only the bloody
8 parents would keep their nose out of this, we
9 could handle it." This I have heard said by
10 teachers, and by social workers, and by youth
11 workers, and yet the parents and the home is
12 the place where the real agony, the real love,
13 and the real concern, and the real growth takes
14 place, finally.

1 Now I don't think, madam,
2 that this agrees with your concern itself. I
3 agree with you there, and I feel this is something
4 the churches have done, and I am a Chaplain and
5 a minister, and I speak with a certain amount of
6 shame about this, that the churches have also
7 sponsored this, and have had their little headache
8 about running the parents and so on down, when
9 it is the parents and the family itself, as a
10 unit, that must be taken seriously.

11 THE CHAIRMAN; Padre, I
12 wonder if your brother officer would like to
13 say something? We have not been introduced.

14 CHAPLAIN FENSKE: I am
15 sorry, this is Chaplain Parkhouse, he is the
16 Commander Chaplain -- he is my boss.

17 CHAPLAIN PARKHOUSE: Well,
18 Ted, you are my spokesman, and I think you have
19 done well.

20 I have nothing to add.

21 THE CHAIRMAN: Gentleman
22 at the microphone?

23 THE PUBLIC: I was listening
24 to him, sir, and he mentioned that he was sort
25 of ashamed that the churches have been involved
26 and so on, with the situations of marijuana and
27 so on, and I think that it should be an honour
28 for the church to be involved with marijuana
29 alone, for the simple reason ---

30 THE CHAIRMAN; Excuse me,

I did not understand him to say that; that the church is involved.

THE PUBLIC: No, he said
that in a way the churches are -- well, I can't
remember ---

CHAPLAIN FENSKE: I said
I feel ashamed that the churches also play a
part in downgrading the role of the family.

THE PUBLIC: Yes, I'm
sorry, sir, I misunderstood that.

Anyway, I have heard it said quite often that marijuana leads to harmful drugs, such as LSD and speed and so on, and I have an answer that is a question, in a way, but is it marijuana that leads to the harmful drugs, or is it the government?

That I have been thinking of, for quite some time now. From the beginning, from the first time that marijuana was brought out, or something like that, the government put marijuana and LSD and speed and all other harmful drugs in one little bag, so to say, in one little bag, and they called it "harmful drugs" and they said this to the public.

People heard this day in and day out, so they grew to believe that marijuana is harmful, like LSD, speed and all these other drugs.

And I even have friends
myself in mental institutions, and I often think

1 "Can I blame marijuana, or the government, for
2 their faulty programming to the people?"

3 And another thing, if the
4 Chaplain can help me, I have noticed in the Bible
5 trees have names, and man has names, and animals
6 have names, but I can't find marijuana in the
7 bible, but I find the word "flax", and I noticed
8 in Matthew 12, it says "He shall not strive, nor
9 cry, a bruised reed shall he not break, and
10 smoking flax shall he not quench, till he send
11 forth judgment unto victory." .. .which in my
12 mind that sounds like marijuana to me.

13 Thank you.

14 THE PUBLIC: If I may
15 just direct a question to the Chaplain?

16 Chaplain Fenske, pardon
17 the analogy, but I have heard the analogy that
18 if Jesus Christ came to Greenwich Village he
19 wouldn't want to leave, basically perhaps,
20 because the drug culture we live in today may
21 have a religious base pertaining to^{it} it. Well let
22 us take as an example, pulling away from material-
23 istic values, relating to the love of money --
24 the love of money today

25 But I would like to ask
26 you one further question. Throughout
27 history, religion
28 has been one of the most powerful influences,
29 perhaps sometimes even more powerful than a state,
30 a government.

1 Today do you feel that
2 religion has a definite rôle to play in our
3 sub-culture, and a definite roll to play in our
4 relation to drug usage among youth?

5 CHAPLAIN FENSKE: I would
6 like to define religion here.

7 If you mean religion as
8 a plastic structure where you go to church on
9 Sunday, in a specific building with Gothic
10 arches and so on, I don't know, I doubt very
11 much if this religion will play any kind of
12 constructive rôle in ~~this area~~ in which you
13 are just speaking.

14 If you would take my
15 definition of religion, which means the deep inner
16 and searching of religion for a meaningful
17 existence, and a meaningful sense of esteem,
18 then I think it has a vital part, and should
19 say something constructive to the sub-culture.

20 THE PUBLIC: Taking
21 religion based on the basic Christian ethics.

22 CHAPLAIN FENSKE: Yes,
23 the deep concern that everyone has to make life
24 somehow meaningful for himself, and somehow that
25 the structure about him has meaning, and a place
26 for him within that, then I think that it
27 has something very real to say to this sub-culture.

28 THE PUBLIC: Perhaps to
29 qualify that, and expand, what rôle definitely,
30 how do you think of any definite role that

1 religion can play?

2 How can it relate directly
3 to the youth, what can it say, and what can it
4 do for us?

5 CHAPLAIN FENSKE: Well
6 I think that religion at its best has always
7 been basically a search for reality. What is
8 real? You see, I think one of the few things
9 that we always hear, and I think it is true
10 with the young people concerned, that our
11 culture today is phony, that the cultures have
12 been shifted and I think this is true in that
13 religion at its best is a search for reality.

14 You know, one of the
15 things that was very frightening in the '50s
16 was books coming out and telling us about the
17 dreadful '80s, when we would be nothing but
18 the automatons and machines and computers
19 would run our lives, and we ^{would} have our grey little
20 lives controlled by ^{machines} and people pressing
21 buttons and so on. Otherwise we would be
22 victims of one or two madmen in some odd quarters.

23 Well, one of the most thrilling
24 experiences of the '60s has been to watch you
25 as young people breaking this and
26 questioning this, and saying, "What is real?"

27 Now that is a basic
28 religious search.

29 Now I feel, and I am
30 going to be very frank with you because I

1 take you seriously as persons -- I feel
 2 that the drug is not a viable alternative to
 3 searching for reality.

4 I feel that I have
 5 enough brains and enough sense and my nerves
 6 are healthy enough that I can search and I can
 7 find reality without using drugs to either
 8 stimulate, or depress, the awful burden of
 9 trying to find meaning in life.

10 THE PUBLIC: Well I would
 11 just like to say about that, that you were
 12 talking about reality as a definite thing, a
 13 concrete thing, whereas to me reality is a
 14 relative thing, and just because whether it is
 15 inside my mind, or outside my mind, it is still
 16 reality, So if drugs give you a higher awareness
 17 of yourself if you don't think that is reality,
 18 you are not real, you will have to look into yourself
 19 for reality.

20 CHAPLAIN FENSKE: But I
 21 would like to meet you really just as you are.
 22 I think you are tremendous and have enough
 23 possible potential that I can find you
 24 fascinating without having to take marijuana
 25 and LSD without finding a new aspect of you.

26 The guts issue is, have
 27 you got the guts to search for this without
 28 using a prop, that is the guts issue?

29 THE PUBLIC: Well, it is
 30 an arbitrary thing / whether you use a type of

1 religion, or you use a drug, and today's age is
2 a fast age, a moving age, and people just don't
3 feel like studying something in depth like
4 an Eastern Religion to obtain that type of
5 thing.

6 CHAPLAIN FENSKE: Well
7 you don't have to study Buddhism and so on
8 to have a relationship with your girlfriend or
9 your friends, and so on.

10 THE PUBLIC: I am talking
11 about self awareness.

12 CHAPLAIN FENSKE: You
13 only become aware of yourself in the presence
14 of other people, and I would hate to have people
15 -- today I was completely misunderstood on two
16 or three occasions, and here we are all very
17 sober and very cold and very mature.

18 Now I would hate to move
19 into a group of people who are on a kick or a
20 high or something, and try to have them really
21 know who I am.

22 I would be dreadfully
23 afraid of the consequences.

24 MR. STEIN: Are you
25 saying, Padre, if I could get into this
26 triangle, are you saying that the mood-modifying
27 drugs of necessity makes it impossible to have
28 this kind of contact between people that either
29 you have a direct real encounter without a prop,
30 or else you are involved in a kind of fantasy

1 type encounter?

2 Is it either/or in
3 your estimation?

4 CHAPLAIN FENSKE: I
5 don't know whether I would say either /or
6 but you know, we have only used at best 10
7 percent of our brain, and here we have 90
8 percent of it stashed away in the upper story,
9 and it's lying dormant.

10 We have all kinds of
11 potential for knowing, understanding, persons.

12 I think I will speak
13 very personally. I have been married to my
14 wife for 18 years, and I still find it fascinating
15 every time I sit down to talk with her, and I
16 find new facets in her, and I would hate to
17 have to turn, and don't think I have ^{turn to drugs,} to/ in order
18 to find a new aspect of her.

19 THE CHAIRMAN: Well Padre,
20 we are here at a very fundamental point. It
21 has brought us to a very fundamental point.

22 I would like to examine
23 a little more the assumption underlying your
24 statement that drug is not a viable alternative
25 to searching for reality.

26 What is it precisely
27 that you have against the drug, as an attempt
28 to search for reality?

29 What is implied by the
30

1 words "not a viable" in your view of the
2 matter?

3 What kind of judgment
4 is implied by those words "not a viable"?

5 CHAPLAIN FENSKE: Well,
6 let me say then it is an easy way out to some-
7 thing that is still inadequate, at its best.

8 THE CHAIRMAN: Well what
9 is implied in the word "easy", what is the
10 nature of the judgment?

11 I don't mean to be
12 cross-examining you; you are being extremely
13 helpful to us. But what is implied by the
14 word "easy" as a value judgment.

15 What have you got against
16 the word "easy"?

17 Now don't laugh, it's
18 not easy, you know seriously, I am not ---

19 CHAPLAIN FENSKE: Can
20 I move over just a little bit, into alcohol.

21 I find over and over
22 again, that people have found life too hard,
23 and there is a big difference between alcohol
24 and drugs, because alcohol is a depressant,
25 and marijuana is a stimulant.

26 Now people turn again and
27 again to alcohol, because the very thought of
28 facing a problem square on, is too dreadful for
29 contemplation, and so they turn to the easy way
30 out; to drink, forgetting of course that sooner

1 or later they are going to have to pay for
2 the consequences.

3 THE CHAIRMAN: Well is
4 there a judgment here that ^{there is} a value in the
5 opposite ^{of} "easy" in struggling, in bearing the
6 anxieties for the search for reality, is
7 this ~~you~~ value that it is essential to human
8 life development in some way?

9 CHAPLAIN FENSKE: Yes,
10 being a Christian, and I feel being a
11 pragmatist on top of this; I went through long
12 years of searching, just as an athlete who
13 wants to reach an excellence, and who wants
14 to break the four minute barrier, for instance,
15 he has to struggle and work and there is no
16 easy way to break the barrier.

17 Now this is physically
18 speaking, and we are a total human being, and
19 in order to break this barrier that we are
20 in now, of our inner meaninglessness and so on,
21 we are also searching.

22 And it is through searching
23 and making a mistake, and I think the gentleman
24 said this morning, he is exasperated about our
25 concern for always being right, and always
26 winning.

27 I feel that when I look
28 back in my life, my deepest learning has been
29 one of when I fell flat on my face and have
30 been able to pick myself up, and then I have

1 gained new insight and so on.

2 In my marriage
3 counselling, I tell people, if you are going
4 to quarrel, quarrel violently but quarrel
5 with meaning, and don't forget it, and remember
6 the pain that was involved, and remember that
7 the other person is struggling as you are,
8 for some kind of meaning.

9 And it is through this,
10 that a real love and a real sense of person-
11 hood and a real sense of fineness comes out,
12 and we cannot go through just like we have
13 instant coffee and instant everything else,
14 we don't have instant personalities.

1 MR. CAMPBELL: Padre,
2 I think we are going to have to draw a line here,
3 I think it is going to be a terribly difficult
4 line to draw. You talk about the use of
5 alcohol, when it becomes an easy way out. In
6 other words, this is letting someone get away
7 from a strain, it is disguising it or backing
8 off from it and finding something more comfortable.
9 What about the night that I go home and I
10 am very tense and I pick up a detective story.
11 That may be an easy way out. It may not be
12 meeting the problem at all. What about the
13 person who is faced with a very heavy level
14 of anxiety and uses a tranquilizer? There
15 are these multitude of different escapes from
16 reality or escape from anxiety or tension,
17 that people use.

18 Now I presume that you are
19 not saying that all of these have a bad moral
20 connotation. If not, where does the line
21 come?

22 PADRE FENSKE: You see,
23 it is just like recreation. Either this book
24 or I take the sherry. I am an alcoholic
25 counsellor and I drink because my concern
26 is for controlled drinking. If I take a
27 sherry, or you read your detective book
28 or take your tranquilizer, and you are
29 relaxed and tomorrow morning you are ready in
30 full strength to go back and you feel almost

1 motivated to go back and face your problem,
2 then I will say this is good. We need to
3 withdraw. But if this becomes a culture and a
4 way out for a meaningful personality, for
5 a meaningful experience for reality.---

6 MR. CAMPBELL: What would
7 you say to the person who said that he found
8 that at the end of the day he would use
9 marijuana and feel refreshed the next
10 morning, or some other drug? There are a
11 great many drugs. I don't accept your
12 distinction that alcohol isn't a drug. To me
13 it is. Liquor is a drug, caffeine is a
14 drug.

15 PADRE FENSKE. What I
16 am saying is alcohol is a depressant whereas
17 the drugs we are talking about here are
18 stimulants. There is a real difference.

19 THE CHAIRMAN: Actually,
20 just as a matter of interest, Padre, we are
21 asked to look at all mood modifying drugs,
22 whether depressants or stimulants.

23 PADRE FENSKE: I see.

24 THE PUBLIC: Could I
25 interject here? It seems to me the Padre's
26 argument, although he hasn't said the key
27 word, seems to be artificial, but that is the
28 way it seems to me, that because it is
29 artificial it is not viable as a source
30 for finding reality. That's two different forms

1 as you found before Buddha-Yoga, it is another
2 way of doing it. It is not looked upon as
3 the same thing as drugs, yet there is, you
4 can freak out, there is a temporary psychosis,
5 self-induced psychosis which can turn into
6 a permanent psychosis, which is the same thing
7 as freaking out, but which is not artificial,
8 so to speak, chemical or things like that.

9 It is not looked at in the
10 same light, whereas it is the same thing,
11 just gone about in a harder way, a longer
12 way, and that is all I have to say.

13 THE CHAIRMAN: Thank you.
14 Lady at the microphone?

15 THE PUBLIC: Padre, you,
16 following the suggestions, that you objected
17 to the artificiality of drugs. Allan W.Watt
18 says in Joyous Cosmology that scientists
19 do not reject the information gathered by
20 using a microscope even though a microscope
21 is an artificial tool to observe the human
22 eye in seeing. So if a person uses a
23 drug as an artificial tool to aid his
24 brain in comprehending, is that not the
25 same thing, and is that not as credible as
26 using the microscope?

27 PADRE FENSKE: I doubt
28 very much if you are aiding the brain in
29 order to comprehend, because the brain is then
30 stimulated and excited and time begins to move

1 slower, Somewhere ahead, what it alters
2 physically. Now surely if it warps --
3 you see one of the problems that face us being
4 on earth, looking at the stars, is that always
5 the atmosphere and so on has worked
6 at the universe. It should be easy to warp
7 our minds, so we get an illusion. Or is life so
8 short and every minute so precious that we
9 be at our best, on our main system and our
10 brain cells work at their best, and sharpest
11 in order that we can comprehend and assimilate
12 and respond in depth without using the drug.

13 THE PUBLIC: Well, you
14 already stated you had read or something that
15 10% of the brain was used and 90% was not used?

16 PADRE FENSKE: Yes.

17 THE PUBLIC: In my
18 opinion with a lot of cases with a lot of people,
19 people use drugs and can utilize some of their
20 brain they are not using ordinarily. I don't
21 consider that some drug use is an
22 illusion, that people just get illusions out
23 of it. I think a lot of people have
24 sincerely found more reality from using
25 drugs than from using their minds. Not just for
26 the drug, but from using the rational
27 thinking processes after using the drug and
28 while taking the drug, and it worked out
29 a more comprehensive look at reality and
30 not an illusion.

1 PADRE FENSKE: I have
2 talked to people who have used drugs, LSD and
3 so on, and I have heard them give me great
4 expounded and in depth great new concepts
5 on philosophy. I have talked to artists
6 who have used LSD and so on, and they have seen
7 great new visions of light and colour and so
8 on. And yet when I was done with them, I
9 found that in the end they were just babbling
10 and there was no book of philosophy they had
11 written and there had been no canvasses that
12 they had printed, which have any of the
13 grandeur of things that they have talked
14 about.

15 THE PUBLIC: Quite true.
16 In some cases this may be so, but in other cases
17 people I know personally have found things
18 that I consider to be a more comprehensive
19 outlook on reality. They found reality
20 and not an illusion. I admit that in many
21 cases you would not find any great philosophical
22 discovery through drugs, but some people
23 have, and I don't think you can discount
24 everyone's experience ^{with} / the experiences of the
25 few people that you talked to, who have
26 not in your opinion reached anything like
27 this.

28 PADRE FENSKE: Well, I
29 think we could go on quite long here, but I feel
30 very concerned that young people who have a

1 completely new mind and who are still young
2 and fresh and clean, that they should turn to
3 artificial drugs when they haven't even
4 begun to use and to experience what is at
5 their fingertips. This to me is the
6 great tragedy of drugs.

7 THE PUBLIC: I would just
8 like to say about the way you used "warped" when
9 you use a drug, and I think this is a quote,
10 I think this is the way you said it, who
11 used the drug to warp their minds. You say
12 warped as if it doesn't seem to make sense
13 to me that a drug warps your mind. Take
14 LSD for instance. What does it do? How
15 does it affect the mind the way it does?
16 It cuts out the filtration mechanism so
17 that the mind gets bombarded with all the
18 stimulations that are around us all the time,
19 that we filter out because we have to filter
20 them out to act in this world, to perform
21 certain tasks and it just cuts that out,
22 so the mind has everything at once, coming at
23 it. And how is that warping the mind,
24 a higher awareness.

25 PADRE FENSKE: Because
26 our mind can't even seem to grasp all the
27 grandeur of our world when we are sober and
28 so on without drugs, let alone have our
29 minds bombarded with the aid of drugs.
30 This is the thing I can't grasp and understand.

1 I am overwhelmed with
2 all the grandeur and so on of life right about
3 me right now, and I don't need drugs to
4 stimulate me to be bombarded even more.

5 THE CHAIRMAN: Thank you.
6 I think perhaps we should release the Padre.

7 Thank you very much,
8 Chaplain.

9 I call now on Mr. Fitzpatrick,
10 Field Representative of the Nova Scotia
11 Alcoholism Research Foundation.

12 Is Mr. Fitzpatrick here?

13 I call then on Mr. Leonard
14 Kitz, past president of the Nova Scotia Barristers
15 Association.

16 MR. KITZ: Mr. Chairman,
17 Commissioners, ladies and gentlemen, I am
18 glad to join in this lively and stimulating
19 meeting. I direct my short remarks to the
20 use of marijuana, chiefly a phenomena of the
21 young which I believe is used by hundreds
22 if not thousands, of persons in this area.
23 For most of us who have reached middle age,
24 or more, the use of drugs is strange and
25 unknown and as a psychiatrist's issue as being
26 unknown it is feared and despised and our
27 society and its laws has acted harshly
28 against it. I have been before four
29 Magistrates in this province in the appeal
30 division of our Supreme Court who concluded

1 that unlike violations of law relating to
2 liquor, automobiles, hunting and such, marijuana
3 is an experience which the personnel of our
4 courts have not had the exposure of temptation.

5 And without such identification,
6 argument to a Court is usually made more
7 difficult. I suspect Judge Elliot Hudson, whom
8 I saw at the back of the hall, this afternoon,
9 might agree with this conclusion. They tend to be
10 generally speaking in this province,
11 follow^{ing}/a reasonably consistent pattern. A year
12 or so ago they tended to be heavier. An un-
13 exaggerated case a little more than a year
14 ago, for possession alone, on appeal to the
15 Appeal Court, substituted a period of
16 imprisonment for what a lower court had
17 decided a suspended sentence. A rather
18 complicated suspended sentence might have been
19 deemed sufficient.

20 I want to look with a little bit of
21 concern at some Courts in the other provinces
22 of Canada who have been more severe; New
23 Brunswick Appeal Court, quite heavily severe.
24 And the seesaw to some extent in dif^{ferent}/parts of
25 Canada with more emphasis in British Columbia.
26 None of this has been as hard of course as
27 what is done in Turkey where persons are
28 executed for dope offences. Indeed we
29 don't have to go as far afield as that.
30 About a month ago, having a short vacation

1 in Barbados and having a case or so
2 pending, I picked up the morning paper of
3 Barbados to read that a young man, involving
4 a case of heroin, had some hours earlier
5 departed this life through the intervention
6 of a firing squad.

7 The young who do use
8 marijuana maintain it is not addictive, that its
9 initial inclusion, into the schedule
10 of the Narcotic Control Act is an afterthought,
11 with little thought at that. The present
12 situation brings in its train a disdain of the
13 law but what must disturb us more: the danger of contempt
14 for the
15 structure and the institutions that regulate
16 society. The best vehicle for marijuana
17 control is clearly the Food and
18 Drug Act. A case can be made that its use
19 is a lesser social evil than alcohol. Indeed.
20 How many violations would there be tomorrow
21 if this day alcohol were substituted for
22 marijuana in the schedule of the Narcotic Control
23 Act?

24 The present situation
25 ^{un}is/desirable and I trust that the conclusion of this
26 commission and other opinion-making groups will
27 lead to a speedy change in the law.

28 In the light of the statement from the
29 Minister of Health, other members of Government,
30

1 and the leader of opposition, there seems
 2 little likelihood that present law will remain
 3 as now formed. And if when it is done,
 4 then for well it will be done quickly.

5 Indeed you now have the
 6 position for those charged for possession
 7 feel that they are like ^{the} / unlucky players
 8 in the game of Blind Man's Buff. If they don't
 9 escape, they are attacked. You might well
 10 recite the lines of Brett Hart: "You see now this old /
 11 He / had the worst of luck; he slipped up ^{dog,}
 12 somehow on everything he struck. Why if he
 13 straddled that fence rail, the darned thing
 14 would get up and buck." I trust if the
 15 Narcotic Control Act needs to be amended
 16 you will consider also a recommendation to
 17 strike from the criminal records earlier
 18 convictions for possession of marijuana.
 19 This stigma on many persons is ^{considered} / criminal in the
 20 eyes of society and is a heavy burden, a bar
 21 to employment and at some times a denial
 22 of the privilege of travel to foreign countries.
 23 The American Immigration authorities bar
 24 persons who have been convicted of certain
 25 crimes. The phrase in their regulations
 26 which is a rather interesting one is that they
 27 will bar persons convicted of a crime involving
 28 moral turpitude. And you can go from one
 29 end of the scale to the other, in considering
 30 a reasonable definition of those words.

1 The throwing of the
2 burden of proof on the accused under Section 8
3 of the Act, surely is an unnecessary departure
4 from one of our historic legal traditions.

5 MR. CAMPBELL: There are
6 two questions I would like to raise. I
7 would like to preface it with a remark
8 you opened ^{with} by the statement that we adults
9 find drug use strange. This is a very
10 common view of adults and I must say it is
11 one that bothered me because I keep insisting,
12 and I seem very lonely in this, that alcohol
13 is a drug and alcohol use is not very strange
14 to adults. There seems to be a most
15 dreadful resistance among adults and among the
16 population generally, to face the fact of what
17 drugs really are, the drugs that they use
18 themselves. It is a gratuitous remark.
19 I would like to go on to the question of
20 criminal records.

21 What would be in your
22 judgment the effect of striking these
23 criminal records? It is my understanding,
24 and I am sure you know much better than I do,
25 that the criminal record as such, is
26 available in fact to quite a few people,
27 that more commonly a person is asked on
28 an application form or a form for a visa,
29 "Have you been convicted of an indictable
30 offence?". Would, in your
opinion, the striking of the criminal record

1 remove the problem of the individual who
2 would still have to answer yes to the question,
3 "Have you been convicted of an indictable offence?"
4 If this is the case, how would you suggest
5 achieving the end that I gather you wish to achieve?
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1 being used. One, considering people over 21
2 could purchase marijuana legally, those under
3 21 who are charged with trafficking or possession
4 of marijuana, will / come under a civil
5 offense, or under the Criminal Code?

6 MR. KITZ: Historically,
7 this phase of the law has been dealt with under
8 a separate statute, not under the Criminal Code.

9 I must confess, if I can
10 diverge slightly from your question, that I
11 rubbed my head in some perplexity at the actual
12 implementation of the change.

13 That a change should be
14 made, but I am concerned of the effect that
15 there would be in the United States for the free
16 use of marijuana in Canada.

17 They tell me this is
18 a diminutive of Canadian sovereignty, I would
19 readily agree with that conclusion too.

20 THE CHAIRMAN: Well, thank
21 you very much, Mr. Kitz.

22 Mr. William Greatorex, is
23 that the correct pronunciation?

24 Nova Scotia Department of
25 Public Welfare.

26 MR. GREATOREX: Mr. Chairman,
27 Commissioners, the brief which the Department
28 of Public Welfare prepared, was submitted some
29 time ago, and I have prepared a brief summary.

30 Would you like to have

1 copies of the summary?

2 THE CHAIRMAN: Yes please.

3 MR. GREATOREX: Rather
4 than try to read the whole brief, I will try
5 to put some of the brief into the summary, and
6 I will read the summary.

7 May I summarize this
8 briefly . the position we have taken in our
9 brief.

10 The Department of Public
11 Welfare believes that the so called drug problem
12 is little more than a symptom of a much broader
13 set of social problems.

14 We have to be concerned
15 and do something constructive about the
16 symptoms. But our time and resources will be
17 wasted if we concentrate entirely on that. We
18 have to be much more concerned about correcting
19 social disorders, which contribute to the
20 problem.

21 One of the arguments put
22 forward by certain persons, is that the drugs
23 causing most concern, for example, marijuana,
24 are no more harmful than alcohol or tobacco.

25 These persons want to
26 argue that since we are permitted individually
27 and collectively to use both alcohol and
28 tobacco to excess, we should therefore, be
29 permitted to use marijuana as we wish, with
30 all prohibitions lifted.

1 We believe this argument
2 is completely absurd and does not stand up
3 under any kind of rigid, logical examination.

4 The drug problem, including
5 such drugs as LSD and marijuana, for the most
6 part, affect our young people between 14 and
7 18, more than any other group.

8 At least it is this group
9 that is causing this Department the greatest
10 concern.

11 It is one thing for a
12 young man over 21 to decide that he wants to
13 abuse drugs and thus make life difficult for
14 himself, and those around him. It is quite
15 another matter for a teenager in high school
16 who has not yet reached 16 to be involved in
17 a permissive drug culture, sanctioned by law and
18 society.

19 Surely, we have an obligation
20 to these young people, to protect them to the
21 limit of our ability and resources, and in ways
22 that might not be justified if the problem
23 related only to the older and more mature
24 portions of the population.

25 We think this salient fact
26 is very often ignored.

27 It is our view that the
28 law, as it stands, should not be changed, or
29 ammended at this time. The information at our
30 disposal is much too contradictory and inadequate

1 to justify any significant change.

2 The Department strongly
3 recommends the establishment of a Research
4 Centre similar to, or combined with, the Addictions
5 Research Foundations that are now operating in
6 some provinces.

7 We think this should be
8 a joint effort between the provincial and
9 federal governments. The approach should be
10 scientific in the best sense of that word.

11 The Department recommends
12 that guidance and counselling resources be
13 greatly increased throughout the province.

14 Now, this I think
15 summarizes the recommendations and the major
16 comments.

17 I think the only area
18 that we did not mention in summary, is in
19 relation to these very limited studies which
20 we did, which has gone into in more detail
21 in the brief.

22 THE CHAIRMAN: Would
23 this be regarded as a statement of the
24 Provincial Government's policy at the present
25 time?

26 MR. GREATORREX: No, I
27 think it could be regarded as a statement of the Depart-
28 ment of
29 Welfare of the Government, but not of the
Province itself.

30 DR. LEHMANN: Are we

1 justified in putting it then, the Department
2 saying that they are not opposing the legal-
3 ization of marijuana for anyone over 21?

4 Is that it?

5 MR. GREATOREX: I don't
6 think this is the intention. I think the
7 intention was ^{that} as this was dealt with primarily
8 in the Child Welfare Division of the Department,
9 it is of concern for the children under the age
10 of 21, and I don't think that there was a
11 conscious answer to over the age of 21.

12 We really didn't attempt
13 to grip with it in our discussion.

14 THE CHAIRMAN: I under-
15 stand with respect to the question of change
16 in legislation, your position is stated in
17 your summary.

18 Paragraph three on page
19 two quoted that it is argued that the laws
20 at this time should not be changed, or ammended
21 at this time.

22 MR. GREATOREX: Right.

23 DR. LEHMANN: Then you
24 do say that ^{with} anyone over 21, that ~~you~~ you
25 would have no particular argument.

26 Then the recommendation
27 that the law not be changed, due to the fact
28 it would be too difficult to change for those
29 under 21.

30 MR. GREATOREX: What

1 we are trying to do here, and the only way
2 I can perhaps answer it, is otherwise expressed
3 in, as the Chairman said, number three.

4 I think number two was
5 an argument used to express our concern for
6 the persons under the age of 21.

7 DR. LEHMANN: Yes, but
8 you say on page 2 at the top, "It is one
9 thing for a young man over 21 to decide that
10 he wants to use drugs and thus make life
11 difficult for himself and those around him ---"
12 as though ---

13 THE CHAIRMAN: I think,
14 if I may, Mr. Greatorex, I think as I understand
15 the position of the Department, Dr. Lehmann, it
16 is reflected in the following sentence on page
17 2 at paragraph 2, "Surely, we have an obligation
18 to these young people to protect them to the
19 limit of our ability and resources and in
20 ways that might not be justified if the problem
21 related only to the older and more mature
22 portions of the population."

23 I think there is again
24 this thing we were talking about later, there
25 were younger people to be protected and the
26 position of the Department is -- am I stating
27 your properly?

28 MR. GREATOREX: Right.

29 THE CHAIRMAN: This
30 indicates there should be no change in the law.

1 That is your position, Mr. Greatorex?

2 MR. GREATOREX: Right.

3 THE CHAIRMAN: Well what
4 do you conceive to be the roll of the Depart-
5 ment of Public Welfare, Mr. Greatorex, in
6 relation to this phenomenon of non-medical
7 drug use.

8 MR. GREATOREX: I think
9 our roll comes in, on recommendations number
10 4 and 5, and perhaps this is the area which
11 we, as a Department, should be directing
12 your attention, rather than to the other
13 areas.

14 THE CHAIRMAN: Research
15 and counselling?

16 MR. GREATOREX: Yes.

17 THE CHAIRMAN: What are
18 the general terms of reference from your
19 department? Is your general function described?

20 It must be described
21 in the statutes.

22 MR. GREATOREX: Yes, it
23 is. The particular division which is concerned
24 in this matter, is the Child and Welfare
25 Division, which administers the child welfare
26 which deals with the three areas of concern
27 in the Province.

28 One is neglected children.
29 Secondly, the retarded child, and thirdly, the
30 child who is having conflict with the law, or

1 most juvenile delinquents are the three
2 areas of concern within the Division.

3 So I think that we are
4 talking here in terms of perhaps support of
5 support to private agencies, and
6 private organizations.

7 I think that we are
8 able to provide a supportive roll, rather than
9 perhaps a direct service, in many cases.

10 THE CHAIRMAN: What are
11 the Provincial Departments that are chiefly
12 involved in your judgment in relation to this
13 phenomenon, and is there any attempt to develop
14 a government policy on it.

15 I can think of Health
16 as obviously one.

17 MR. GREATOREX: And
18 Education.

19 THE CHAIRMAN: And
20 Education. The Department of the Attorney
21 General would not be so involved.

22 MR. GREATOREX: I believe
23 of
24 they are, because/the adult probation service,
25 and also prosecutions.

26 THE CHAIRMAN: But
27 prosecutions are mainly handled through justice,
28 aren't they?

29 MR. GREATOREX: Well,
30 in this Province, it is very general.

But the adult probation

1 service would definitely be involved, within
2 the government.

3 MR. STEIN: What is
4 your view -- were you able to take in the
5 hearings this morning?

6 MR. GREATOREX: No,
7 sorry, I was out of town. I just arrived
8 here recently.

9 MR. STEIN: Perhaps
10 this question is a little unfair, but we heard
11 from two groups here in Halifax that were
12 trying to provide services to young people
13 in relation to some of the general problems
14 of youth, including drug related problems.

15 Mr. Watt there at
16 the microphone being one of the groups, rep-
17 resenting one of the groups, and Dr. Moreton.

18 If you could tell us
19 about the department that you represent towards
20 these kinds of programs.

21 Is there any policy on
22 this? Do you have any communication?

23 You mentioned the
24 increase of counselling services, and I
25 wondered what your perception of this is.

26 MR. GREATOREX: It is
27 very difficult to generalize, to say as a
28 blunt statement, but I think the decision in
29 any discussions I have been involved in --
30 offering strong financial support which the

1 organizations would like to have indeed to
2 be a strong reliable body. But in terms of
3 education toward this supporting, but in
4 terms of financial -- it is not what many
5 organizations would like to have.

6 MR. STEIN: To go back
7 to your operations here, is it correct to
8 assume your Department favours the present
9 criminal/^{law}treatment, or in effect the treatment
10 of this phenomenon through the criminal law,
11 at the present time.

12 In other words, no
13 change at all is your view, that those
14 youngsters, etc. should be dealt with through
15 the criminal process.

16 MR. GREATOREX: This is
17 the view at the present time.

18 MR. STEIN: Do you see
19 any problems in terms of this question of
20 counselling?

21 In other words, we
22 have been told over and over again, that as
23 long as possession of these drugs are illegal,
24 it will inevitably affect people in the
25 community to offer help, and it will affect
26 the attitude on the part of young people, or
27 anyone who is using the drugs, to go for help.

28 Do you see any conflict?

29 MR. GREATOREX: There may
30 be, but I think the primary emphasis of the

1 counselling deals with the statement in
2 number one, in that we have to be much more
3 concerned about the total situation, rather
4 than focusing just on counselling re drugs.

5 I think we are
6 talking about a broader program.

7 MR. STEIN: Yes, I
8 appreciate that point, but again the point
9 has been made to us that due to the climate
10 of anger toward the law, ~~fear~~ of recrimination
11 and because of this law on this area, the
12 other problems, not the drug use, but the
13 other personal problems can't get surfaced
14 and can't get dealt with because there is
15 a fear that the person seeking the help
16 may become a victim of this criminal process.

17 MR. GREATOREX: Yes, I
18 think to me, a lot of the thing relates to
19 persons who are in the area of counselling.

20 MR. STEIN: What would
21 their role be in your mind, if they are faced
22 with an individual who is clearly in violation
23 of the law, as it presently exists?
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1 MR.GREATOREX: Personally

2 I think the relationship has got to be one of
3 trust and confidentiality and so forth. It
4 has got to be respected within the relationship.

5 MR. STEIN: So if there
6 was an instance of a person being in the
7 possession of a drug, just giving an example,
8 a seventeen year old is in possession of
9 marijuana and he is seeking help but he is
10 clearly in possession of marijuana, when you
11 see him, and he is concerned about protection
12 through the criminal law. You are in favour
13 of the continuation of it for the time
14 being. Would you see the responsible
15 role for a counsellor in this situation
16 to turn the youngster over to the law
17 enforcement agency?

18 MR. GREATOREX: Except
19 I think that the counsellor has got to
20 declare himself before he becomes involved
21 in the situation, either with saying "Look,
22 I feel a responsibility. If you indicate to
23 me if you are breaking the law, that I am
24 going to have to pass this on."Then he can
25 be honest with the child and say, "Look, you
26 can trust me completely and I am not going
27 to say which way it should be, but I am
28 saying he should declare himself to the people
29 he is working with at the beginning so that
30 they know what he is going to do with the

1 information.

2 THE PUBLIC: Calling
3 on Mr. Stein, as I am a bit confused here,
4 you gave the terms of reference in the
5 department and I am particularly interested
6 in those with relation to counselling. Because
7 as I understand from what you read there,
8 you only become concerned with the counselling
9 when people have problems with the law,
10 which means, as I understand it, and you can
11 correct me on this, but this only happens
12 after the child has been arrested, which is
13 not preventative, it is supportive after the
14 fact. And this type of problem is exactly
15 the kind of thing that you know that I have
16 had problems with.

17 MR. GREATOREX: Yes, I
18 think that, you know, in the particular
19 program I am in now, we are dealing with a
20 certain area after a charge has been
21 laid. But I personally, and other
22 persons within the department and other
23 persons involved in this matter ---

24 THE CHAIRMAN: Excuse me,
25 could you speak more closely to the microphone?

26 MR. GREATOREX: This
27 sufficient?

28 THE CHAIRMAN: Still
29 can't hear you. Bring the microphone
30 closer to you.

MR. GREATOREX: It must be

1 a much broader sort of counselling than what
2 we are able to sometimes offer within
3 limitations of the law and budgets and so forth.

4 THE PUBLIC: The problem
5 sir, if you are talking in terms of expanding
6 the counselling services of the department
7 and the limits in which the department can
8 operate, ~~is~~ going to sever the possibilities
9 of those counsellors actually doing anything
10 effective with something before they get
11 busted. This is a kind of catch that is
12 involved with that. Now I am interested
13 to find out what sort of relationship works
14 there with something like the kinds of
15 organizations that are building up, under,
16 say, Dr. Moreton's group, the East Communications
17 Society and I am sure there are going to be
18 more and more of these organizations.

19 MR. GREATOREX: I must say
20 firstly we would be more interested in
21 prevention ourselves, but firstly if our
22 provision of carrying a case load of fifty-five
23 or sixty kids and have ^{that} responsibility,
24 ~~then~~ they are not going to be able to do a
25 lot more prevention work with working with
26 thirty-five or forty hours a week. They
27 are not going to get into a lot of prevention.

28 So we have to look more to the
29 private sector of society to be involved in
30 this area. At least at present.

1 THE PUBLIC: I gather
2 from this then, are you saying that if we
3 find more of these organizations, and I
4 am using communications as one example, do you
5 see the role then of the department from its
6 perspective being to support that organization
7 so it can have workers who are outside the
8 ~~probation~~ field itself, in sort of what
9 you might call the pre-probation stage?

10 MR. GREATOREX: Right.

11 THE PUBLIC: Right. That
12 is what I would like to find out.

13 MR. CAMPBELL: Could I
14 clarify a point with you? In this second
15 paragraph on page 2, I am wondering if your
16 support for the criminal law use here, is based
17 on a belief in the deterrent capacity of the law
18 or if you are looking to the law as an
19 expression of an opinion or a value of the
20 society? The criminal law can legitimately
21 be used in either of these ways, and I was
22 wondering where your emphasis stands here?

23 MR. GREATOREX: I think
24 it is clearly decided as a deterrent.

25 MR. CAMPBELL: As a
26 deterrent to use?

27 MR. GREATOREX: Yes.

28 MR. CAMPBELL: It has
29 been suggested to us rather frequently and
30 suggested again at the noon hour as a matter of

1 fact at Dalhousie, and I think this morning,
2 that while the number of convictions has
3 increased, ~~that~~ the general bulk of evidence
4 suggests a massive increase of certainly
5 marijuana use that purportionately is much
6 greater than the increase in the convictions.
7 At least this is a tenable hypothesis.

8 And a conclusion was
9 drawn in the statement made to us that the
10 law was not terribly efficient and while
11 the speaker didn't rule out the deterrent
12 capacity of the criminal law, he suggested
13 that it was in fact of limited effect, indeed
14 very limited effectiveness in his opinion.
15 I was wondering how you would answer the
16 position that this man made to us.

17 MR. GREATOREX: First I
18 don't want to state -- or I think we are
19 stating that we don't know what the real
20 effects of marijuana are. This is the
21 opinion of the group I am speaking for.
22 Not knowing, then I do think that it is
23 my opinion at least that if amendments were
24 made to the law and if the drug were more
25 accessible, then I think that there would be
26 even a greater increase in usage than
27 there has been now. And not knowing whether
28 it is good or bad, we are not prepared to
29 see that increasing usage which I feel
30 would come about with an amendment to the

1 legislation.

2 MR. CAMPBELL: That is
3 what we wanted to clarify.

4 MR. STEIN: Supposing
5 it was found out it were good and bad, in
6 other words that it is good and it is bad,
7 it can be good, it can be bad.

8 Would you find a conclusion that you
9 might be able to consider or are you looking
10 for a good or bad kind of conclusion?

11 MR. GREATOREX: I think
12 this is something that could be considered
13 but I think you are then putting it on a scale,
14 which way does the balance fall, and I think
15 that if the evidence has enough positives
16 to outweigh the damage of criminal record,
17 as Mr. Kitz pointed out, then I think we
18 would look very closely to the position taken
19 at this point and time.

20 Another thing that I
21 think is of interest, and when you raise that
22 question, is the lack of knowledge and
23 where we look at our own staff, the lack of
24 intimate knowledge in the usage and the
25 different answers that we got from staff,
26 that we are getting from people that we
27 are working with, when we really stopped and
28 asked them. And I think because lack of
29 knowledge is something that perhaps has been
30 a benefit of just working and preparing the

1 brief, is we are becoming a bit more
2 concerned within the department in terms
3 of staff training, and making people more
4 aware of what the situation can be and tend
5 to learn more ourselves. I think it has
6 got a positive effect for us at this point.

7 MR. CAMPBELL: Mr. Greatorex,
8 I find myself extremely concerned by what
9 would appear to be a pronounced increase
10 in alcohol use by the same generation that
11 you speak of, the young teenager, and by
12 the continued very heavy use of tobacgo
13 in say, the 13 or 14 year old age group, both
14 of which are offences. The use of alcohol
15 at that age, and I believe the selling of
16 cigarettes to people under the age of 16
17 is in violation of the law.

18 I find this frankly
19 rather terrifying - a rather terrifying
20 phenomenon. Would you suggest the use
21 of quite heavy sanctions in these instances
22 to attempt to curb the continuation or the
23 increase of this practice?

24 MR. GREATOREX: Well,
25 I don't know. I can't speak to tobacco really
26 at all, but I think in terms of alcohol under
27 the provisions of the Juvenile Delinquency
28 Act, we have much the same legislation concerning
29 use of alcohol as we do for a child
30 under the age of sixteen. This is the area

1 of my concern. The child under sixteen is
2 found guilty of a delinquency, to wit, drunkenness
3 in a public place. ~~or murder.~~ So really
4 for the juvenile -- now the adult is a
5 much different situation and really beyond
6 the area that I can talk about.

7 MR. CAMPBELL: Juvenile
8 Act applies to what, up to sixteen in Nova
9 Scotia?

10 MR. GREATOREX: Yes.

11 MR. CAMPBELL: Well,
12 what about 16 year old, for alcohol, should we
13 use a higher sanction here?

14 MR. GREATOREX: For drugs?

15 MR. CAMPBELL: I don't
16 want to necessarily compare it with that,
17 but I am trying to follow through the argument
18 that we should ^{apply} the penal sanctions here
19 and I am quite prepared to admit I am
20 terribly concerned with the use of alcohol
21 at this age. It is a very serious matter.
22 And I wonder if you apply the same logic
23 to dealing with it?

24 MR. GREATOREX: My feeling
25 is, to a larger extent, we know what the
26 effects of alcohol are. We don't know
27 how it will affect different individuals
28 differently. In some it will have
29 perhaps a minimal or no effect on them other
30 than the fact that they may be charged,

1 The others who may continue and develop it
2 into a real drinking problem, alcoholism or
3 whatever. I would not see no reason
4 at this point in time, to suggest any
5 changes to make a great punishment for the
6 use of alcohol.

7 That is a very quick
8 answer without ---

9 MR. CAMPBELL: In view
10 of the effects we know of alcohol.

11 THE CHAIRMAN: The lady
12 at the microphone?

13 THE PUBLIC: You were
14 talking about the juvenile age and it is also
15 generally sort of agreed that it is undesirable
16 under the present law that people get a
17 criminal record out of the conviction.

18 Now, do you think that one
19 of the things that the Department of Public
20 Welfare would be in favour of, would be
21 raising the juvenile age to eighteen, so that
22 all those persons under eighteen were convicted
23 under the present law, at least, would not have
24 a criminal record out of it.

25 And also another thing,
26 do you have statistics on the number of
27 juveniles that have appeared before the
28 Court on drug charges in this province?

29 MR. GREATORIX: I can't
30 really answer the first question, because I

1 don't think we as a department have come to
2 grips with it and anything I could say would
3 only be my own personal opinion.

4 In respect to the second,
5 I think the thing that stands out is that
6 very few people who have been charged with
7 the use of drugs -- now the large number of
8 people who have been charged with other
9 offences, for example, the nature of the
10 offence, will, after we get to know the
11 child, ... let us know he has been
12 involved in the use of drugs at some point in
13 time, but the number of charges for that has
14 been minimal in my experience at this point.

15 THE CHAIRMAN: Gentleman
16 at the microphone?

17 THE PUBLIC: Yes, I would
18 like to make one point for the legalization
19 of marijuana and that is that in the
20 prohibition years drinking was prohibited
21 as well as marijuana is now.

22 People started making
23 stills, they made a lot of alcohol that had
24 impurities in it. This caused blindness
25 among people and it led right to death,
26 among quite a few.

27 Also, the poor who didn't
28 have enough money to spend on the alcohol, they
29 started getting into things like shaving lotion
30 and they just started to drink anything they

1 could. And I just want to draw a
2 parallel between like marijuana now is
3 prohibition, we are in a prohibition of
4 marijuana now. There are impurities in
5 marijuana that come into the -- just because
6 some dealer will cut it with something
7 and by the time it gets here you have got
8 quite a few impurities. And this is turning the
9 kids to garbage ~~downs~~ like gravel pills and
10 things like this and it took many years for
11 alcohol to be legalized. And I am just
12 wondering how long it will take before anybody
13 realizes the impurities are causing a lot
14 of kids to -- let me just put it this way:
15 our hospitals are going to be filled up
16 as long as marijuana isn't legalized.

17 Thank you.

18 THE CHAIRMAN: Thank you.

19 THE PUBLIC: I would
20 like to know, the policy of your department
21 is the health and welfare of the children
22 and you advocate that the law should not be
23 changed. In effect what you are saying
24 is that you should send the people who are
25 convicted to prison. And these people who
26 go to prison are exposed to homosexuals,
27 murderers, rapists, the worst people in
28 society. I was wondering how this is
29 good for the children.

30 MR. GREATOR: I think that

1 -- I am certainly not in favour of seeing
2 convictions, don't get me wrong, but I think
3 you have come to some point of perhaps having
4 to weigh -- let me ask you the question:
5 You are saying you feel it is better to permit
6 the use of marijuana than to have any
7 convictions at all.

8 THE PUBLIC: I believe it
9 is better for the children that they should not
10 not be convicted of
11 such charges, because I think that the legal
12 aspects are much worse than the physical
13 aspects.

14 MR. GREATOREX: You see,
15 I am not quite certain at this point in time
16 that I could agree with you.

17 THE PUBLIC: Would you
18 not recommend the law should be changed,
19 that it is not an offence and people shouldn't
20 be sent to prison because the law says now
21 you can be sent to prison for from two to seven
22 years for just for possession and twenty-five
23 years or more for trafficking. Would you
24 not think it is viable to, say, put it under civil offence
25 as a more suitable means ---
26
27
28
29
30

1 MR. GREATOREX: Which then
2 is giving sanction, you say?

3 THE PUBLIC: Not sanction
4 to the effect that you are saying its okay
5 to take them. This is not accepted.
6 But we think that things should be done to ---

7 MR. GREATOREX: Yes, I
8 know what you are saying. I have some concerns
9 about the person who has a serious record, long
10 period of incarceration, and so forth, but
11 there is also the question of how far do you
12 go and what is the long-range effect? There
13 is two sides and we haven't come to grips with
14 it enough to say what should be done.

15 THE PUBLIC: Well there is also
16 the
/aspect that the person who is convicted cannot
17 leave the country, they cannot travel in
18 any way, which excludes them from any
19 government work which takes them abroad.

20 It also bars them from
21 the medical profession and legal professions
22 and this is all because they felt/^{that} they would
23 like to enjoy themselves for a little while.

24 It seems to me that this
25 is a very harsh way to deal with this type of
26 problem: to just put them on a criminal offence.

27 MR. GREATOREX: Yes,
28 I tend to agree with the effects -- they are
29 harsh -- and I think your statement is
30 correct.

1 THE CHAIRMAN: Dr. Segal?

2 DR. SEGAL: The tremendous
3 amount of concern shown by the Nova Scotia
4 Society of Public Welfare seems to concern me
5 very much. May I get you to search your own
6 conscience? How do you yourself feel or how
7 does the Nova Scotia Society of Public Welfare
8 feel specifically ^{about} what was reported in the
9 paper today?

10 When two communities
11 within a hundred miles of each other and in
12 the same province, can take one nineteen year
13 old and sentence him to Dorchester for two
14 years on possession and a sixteen year old,
15 a six months sentence for trafficking, how do
16 you feel about something like this, where you
17 have such a discrepancy in the sentencing
18 when you honestly say you are concerned
19 about helping these people in society?

20 MR. GREATOREX: I don't
21 think -- Dr. Segal -- I haven't seen the paper,
22 I don't know anything about the circumstances
23 enough to comment to that.

24 THE CHAIRMAN: Thank you
25 very much, Mr. Greatorex.

26 Is Mr. Don Lampre, is Mr.
27 Lampre the right pronunciation?

28 Well, that is all right,
29 if you don't want to you don't have to explain,
30 I just thought -- I took my notes that I had

1 here -- it is all right.
2
3

4 Well, we have had a
5 very full day, and a very instructive helpful
6 day, and this is, I think, our sixth city,
7 but I think I can say on behalf of myself
8 and my colleagues that we feel that we have
9 been very well received here and we have
10 been given great assistance, and we are very
11 grateful for the amount of effort that
12 has been put into the preparation of these
13 briefs and presented at our meetings, and
14 we are highly gratified that we have had
15 the benefit of the hearings here.

16 We go on to St. John's
17 tonight, and since time is a
18 bit tight, and we have received a very
19 kind offer of hospitality from someone who
20 is present here, which we want to accept,

21 at this time I think I am going to take
22 the liberty of adjourning our hearings here
23 in Halifax and thank you all for your
24 participation.

25
26 ---Upon adjourning at 4:25 p.m.
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COMMISSION OF INQUIRY
INTO THE
NON-MEDICAL USE OF DRUGS

COMMISSION D'ENQUETE
SUR L'USAGE DES DROGUES
A DES FINS NON MEDICALES

BEFORE:

Gerald LeDain,	Chairman,
Ian Campbell,	Member,
J. Peter Stein,	Member,
H.E. Lehmann, M.D.,	Member,
James J. Moore,	Executive Secretary,

RESEARCH:

Dr. Ralph Miller,
Dr. Charles Farmilo.

SECRETARY TO THE CHAIRMAN:

Vivian Luscombe.

January 29, 1970,
Queen Elizabeth High School,
HALIFAX, Nova Scotia.

1 --- Upon commencing at 8:00 P.M.

2
3 THE CHAIRMAN: Ladies and
4 gentlemen, I call this hearing of the Commission
5 of Inquiry into the Non-Medical Use of Drugs to
6 order.

7 Perhaps a few words of
8 introduction might be appropriate, just a
9 reminder of our past, the nature of our terms
10 of reference.

11 We were appointed in May, last
12 year, as an independent Commission of Inquiry
13 on the recommendation of the Minister of Health
14 and Welfare.

15 We are asked to examine the
16 extent of the non-medical drug use in Canada, the
17 current state of the knowledge concerning the
18 effects of drugs, and the causes of non-medical
19 drug use, and the other factors which have a
20 bearing on it, social, philosophic factors.

21 And then we are asked to make
22 recommendations to the Federal Government, as to
23 what it can do, alone or with other governments,
24 like Provincial and Municipal Governments, to
25 reduce the problems involved in non-medical drug
26 use.

27 This inquiry has inevitably
28 brought us to look at the present legislation
29 as a legal treatment of the phenomena. It has
30 been a big issue, certainly, in the inquiry.
 Serious question has been raised, about the

1 appropriateness of the criminal law in this field,
2 whether it is proper use of the criminal law, and
3 this has been a major focus of concern.

4 We have also heard a great
5 deal of testimony as to the cause and the meaning
6 of this phenomena, larger meaning of it, and we
7 hope to hear from you tonight, on both of these
8 matters.

9 We also heard a great deal of
10 evidence as to effects relative to potential harm
11 of the various drugs, potential for individual
12 harm, potential for social harm.

13 The impression that we have
14 received from our hearings, and our studies so
15 far, is that this whole question involves decisions
16 basically of a moral character, moral judgments,
17 value judgments. They are decisions we have to
18 make together, as citizens. They are not just
19 matters of expert knowledge, scientific knowledge.
20 You can't pass it off to scientists completely,
21 although we are entitled to look to a scientist
22 to assist us to get facts.

23 So we have tried to develop
24 public forum, to get the benefit of as much
25 opinion as we can, on just what is the proper
26 response to this challenge. And this is a challenge,
27 there is no question about it, or we wouldn't be
28 here tonight, and it poses very pressing problems
29 and questions about having developed sound inform-
30 ation, how to communicate, transmit it, get it

1 distributed in a timely way.

2 It raises fundamental questions
3 about the role of drug education; is it a good
4 thing at all to pass out information? Does it
5 encourage drug use? Does it arouse a healthy
6 curiosity, or is it the only rational path to
7 wisdom, development of the ability to live wisely
8 with the drugs, and so on?

9 These are all very difficult
10 issues of judgment, and policy, and none of us
11 can evade these issues, and we have formed a very
12 strong opinion that this is a responsibility for
13 all of us as citizens.

14 So we hope that you will assist
15 us, especially in your own views.

16 We have no plan tonight, no
17 formal submissions. We want to be free to have in-
18 formal discussions, and there are microphones
19 placed in each aisle.

20 If you could be good enough to
21 step up.

22 I think
23 will
24 we/start off right at the very basis, our general
25 attitude towards drug use, as such. I mean what
26 is our sense of this phenomenon? Is it unbalanced?
27 Is it a thing to be controlled? Is it a thing
28 to be indifferent to? Is it a matter of indifference
29 how it develops? What do we feel about it? Are
30 there distinctions to be made?

Some people distinguish, they

1 say the distinction of use and abuse, for
2 example. Others suggest that reliance on drugs
3 is altogether a thing to be avoided, as far as
4 possible, although it may not be practical entirely.

5 I think we have to start to
6 form some opinion. The government says we
7 should recommend on how to reduce the problems
8 involved in the use. There is an assumption there
9 is problems, and we are asked to consider measures
10 to reduce the problems.

11 Now, what are the problems
12 involved in non-medical use of psychotropic mood-
13 modifying drugs? What do you think the problems
14 are?

15 Some people see the problems
16 as harm, a lot of potential harm to the individual.
17 Some see the problems as a harm to society, and
18 others have suggested the only problem is the
19 present state of the law.

20 What is the problem? What
21 are the problems?

22 And having identified them, what
23 is the proper role of law? Should the law be
24 in this at all? Has the government got a respons-
25 ibility? Has the government got a responsibility
26 to keep harmful substances, to prevent the avail-
27 ability of harmful substances? Has it got a
28 responsibility to control quality of substances?
29 What is the role of government?

30 It is a very important issue.

1 I don't know where else it can be decided, except
2 in a public forum. It can't be thought up in some
3 back room.

4 These are the things that are
5 concerning us. We are trying to form judgments on
6 this, and we would welcome your thoughts.

7 Is it a problem? What is the
8 real nature of the concern here?

9 So we would -- perhaps my
10 colleagues would like to say something on this.

11 DR. LEHMANN: I wonder whether
12 I should talk out of school, but just before we
13 started here, we had a private discussion, and in
14 it we wondered whether we should ask you, the
15 audience, challenge you as to why there are so
16 many young people and so very few of the older
17 generation, and why there seems to be a general
18 unease between, well, the younger and the older
19 generation, in discussing this whole problem?

20 Some of us thought that, well,
21 it may not be a good thing to strengthen this idea
22 that there is a generation gap. On the other hand,
23 I feel that we should discuss it with you, because
24 there are here about ninety percent younger
25 people, very few parents.

26 This is a high school auditorium.
27 We thought this would be a familiar environment for
28 parents. This is not only here, but in all the
29 other cities, we had the same experience. There
30 seem to be few of them. They are not here and they

1 can't speak, but perhaps some of you could surmise
2 why your parents aren't here.

3 THE CHAIRMAN: There are some
4 who are here, and it always works out this way,
5 that those who come have to listen to the reproach
6 for those who didn't come, and we certainly welcome
7 those who are here.

8 But Dr. Lehmann is expressing
9 a concern we had. Speaking in proportionate terms,
10 we have been exposed
11 to a good cross-section of adult opinion.

12 Gentleman at the microphone.

13 THE PUBLIC: Two questions for
14 the Commission: back to the supporting summation
15 of the Commission's reasons for operating, reasons
16 for development, and what you hoped to attain, and
17 you stated you would try to gather data outside
18 of Canada.

19 To what extent will you be doing
20 this? What other countries will you be obtaining
21 information from?

22 THE CHAIRMAN: Well, in 1970 we
23 expect, and this is during this year, we expect to,
24 if not as a group, individually visit certain
25 countries for specific inquiries into specific
26 matters.

27 For example, the Scandinavian
28 approach as to control of amphetamines is a thing
29 we have to examine at first hand.

30 We have to find out how others

1 have approached the problem of drug classification,
2 technical matters of classification, different
3 problems of that kind, on specific issues.

4 Quite frankly, we haven't
5 decided yet what we can usefully do, to take
6 advantage of the experience with cannabis in other
7 countries. We are giving very careful thought to
8 it, taking the best advice that we can. But there
9 are certain apparent problems there, and we are
10 not sure that we can overcome them, or
11 what we could do would be applicable.

12 There are important cultural
13 differences, as you know, between our situation
14 here, and situations in some of these countries
15 where there has been widespread, and long-standing
16 use of cannabis.

17 But we certainly want to do
18 whatever is feasible, and we haven't yet
19 determined, though, just precisely what should be
20 done.

21 We, of course, have read, we
22 are familiar with the studies that come out of
23 there, going back to the Indian Hemp Commission
24 study.

25 But whether we can make a
26 retrospective, useful retrospective study of use
27 there, that would be applicable, that would be
28 relevant for our purposes in North America, is
29 not clear at this time.

30 And just what would be involved

1 in time, and resources, and local permission, and
2 so on, local co-operation to carry that out, is
3 not yet clear to us.

4 THE PUBLIC: Second question:
5 early this morning, at the beginning of tonight's
6 session, it was mentioned that youth uses drugs,
7 and the emphasis has been placed on youth using
8 drugs.

9 Now, Professor Whitehead pro-
10 vided us with some interesting statistics during
11 the afternoon. I wonder if the Professor has any
12 information concerning the use of tranquilizers
13 among the adult population in Canada?

14 THE CHAIRMAN: Is Professor
15 Whitehead here tonight?

16 THE PUBLIC: Right behind me.

17 THE CHAIRMAN: All right.

18 DR. WHITEHEAD: Thank you.

19 Not really any more information than I have provided
20 this afternoon, and sketched it out very briefly.

21 For those people who weren't
22 there this afternoon, I would cite once more the
23 study that was done in California by Blumm where
24 they tried to ascertain what patterns of drug use
25 is in a normal population of adults, and so on, and
26 of course, the characterization of that population
27 was high rates of drug use, and high rates of
28 multiple drug use.

29 That is, adults, even normal
30 adults use a great variety of -- adults use tranquil-

1 izers, use barbiturates, use alcohol, tobacco,
2 birth control pills and various other kinds of
3 drugs.

4 So both prescription drugs,
5 and non-prescription drugs that can be purchased
6 over the counter, and so in a sense, the idea of
7 non-medical drug use is certainly not a problem
8 that centers solely on youth.

9 Rather, one of the reasons
10 that it has really come to our attention, is the
11 fact that there are many youngsters using it, and
12 in spite of what many youngsters think it shows
13 something seriously of the older generation, for
14 the younger generation. Because maybe if there
15 were older people using drugs, and using drugs
16 in such a way as to get in trouble with them,
17 there probably wouldn't be such a thing as the
18 Commission on the Non-Medical Use of Drugs.

19 So in that sense, I think that,
20 you know, those of us who are relatively young,
21 should be rather pleased that much attention
22 is devoted to the topic right now.

23 MR. STEIN: I would be interested
24 in knowing whether the gentleman who asked the
25 question about our international travel had any
26 suggestions.

27 Did you have something in mind
28 you wanted to propose?

29 THE PUBLIC: I think the thing
30 that prompted me, besides seeing it mentioned in

1 your summarization, was the fact that I believe
2 Mr. Segal, when speaking about carrying on research,
3 mentioned the importation of drugs from the United
4 States which he was dealing with at the time.
5 The importation of drugs for research in the United
6 States, I wondered why this was not provided by the
7 Canadian Governemnt or if it was provided for research.
8 And in this sense I thought that if you were carrying
9 on a research program with the United States govern-
10 ment, if the commission, or a group in Canada was
11 also carrying on relations with the United States,
12 concerning drugs.

13 THE CHAIRMAN: Yes. We are in
14 contact with the research being carried on in the
15 United States, and we are trying to form a clear
16 impression of what research is in progress, and what
17 we might expect from it, within the foreseeable future.

18 Of course, the Canadian Government
19 through the Department of National Health and Welfare
20 has invited people to engage in research, and they
21 have offered to supply cannabis.

22 Now we heard some problems from
23 Dr. Seigel this morning, involved in that particular
24 funding, and they have in fact sent out letters
25 indicating the procedure for obtaining approval,
26 obtaining cannabis.

27 It remains to be seen what the
28 response is to that, and what difficulties, if any,
29 arise, in getting it effective.

30 DR. LEHMANN: In connection with
this, I should like to point out that this general

emotional charge that surrounds the whole drug. question, particularly cannabis at the time, has left its imprint also on scientists, and researchers, and it is quite interesting, sometimes a little irritating to see how, even in discussion between scientists across the border; for instance, there is a good deal of emotional haze, and instead of simply being irritated with the red tape, or lack of funds which exists across the border about anything, all of a sudden it becomes focused, as if this was all due to the fact that one is inquiring or trying to get cannabis.

A lot of the difficulties that exist, are just simply the usual red tape, bureaucratic difficulties.

But as I just mentioned, the emotional irritation about the whole thing, is such that everybody gets involved, and there are no special difficulties about it.

There may have been some in governments, but there is now a good deal of evidence that governments in the United States and in Canada, are trying to do their best to make this stuff available for research, but there are bureaucratic obstacles. There always have been about anything.

THE PUBLIC: Earlier on today, getting back to this afternoon's session, I believe we were discussing researching cannabis, and I believe one of the Commissioners stated that it was not really necessary, or he didn't feel it was

1 all that necessary, to continue researching into
2 cannabis as a lot had been done in that in
3 Canada.

4 If a lot of research has been
5 done, much of this information must have been
6 forwarded to the Canadian government. Do you know,
7 have you been in contact with the Canadian government,
8 what the present government's stand on possible
9 legalization of marijuana is, or the effects of
10 marijuana, at this present moment?

11 Or can you speak to that, as
12 Commissioners?

13 THE CHAIRMAN: I think the
14 answer to the first question is no, we don't know
15 what their position is; and secondly, if we did
16 know, we couldn't speak to it.

17 MR. CAMPBELL: I would like to
18 simply add here, that all of us make the assumption
19 the government is going to listen to what we say
20 seriously, take serious accounts of our report.

21 The purpose of meetings like
22 tonight, is not so much, I think, for us to give
23 information at this time, but to hear what you
24 would like us to say to the government, what would
25 you like a Commission like this to say, that your
26 anxiety is to be expressed, or policies you wish,
27 to the government, or explanations you would like
28 put to the government.

29 We are really in your hands,
30 and hopefully we can play a role that can be useful

1 to you as the Canadian people, as for a vehicle
2 in which you could speak to the government, and
3 the way the government should listen.

4 THE CHAIRMAN: Gentleman at the
5 microphone.

6 THE PUBLIC: I am quoting from
7 a book here, Drugs and the Law, by Reginald Whittier,
8 and it is called "The Canadian Scene". It is under
9 the Narcotics Control Act that a man is con-
10 sidered guilty until he is proven not guilty.

11 If this is true, and then from
12 there, why is it done this way? Why isn't it
13 done the normal way, where you are innocent
14 until you are proven guilty?

15 THE CHAIRMAN: Well, I think
16 he is referring there to the fact that a charge
17 for possession, a charge of possession for the
18 purpose of trafficking.

19 It is sufficient for the Crown
20 to prove possession, in order to shift the burden
21 to the accused, to prove that he is not possessing
22 it for the purpose of trafficking.

23 And the way the law is set up,
24 is, the Crown has to prove possession. The burden
25 is on the Crown to prove possession within the
26 meaning of the law.

27 Then the accused, and the
28 defense is heard / and the defense must prove that it
29 was not possession for trafficking, and the Crown
30 has an option to answer that.

1 This is a departure, yes, from
2 the general principle, and I don't think it is for
3 me to attempt to explain it, or justify it.

4 It is one of the exceptions to
5 the regular procedures which have been thought
6 necessary, for effective law enforcement in this
7 field.

8 But it is certainly one that
9 we have to look at critically, and it is one of
10 the, if you want, one of the prices. I mean, there
11 is no other way to put it, perhaps.

12 It is one of the prices being
13 paid, for law enforcement in this particular
14 field.

15 There is no doubt that law
16 enforcement is difficult in this area, because
17 of the nature of the conduct which is being
18 prohibitive. The problem arises from the fact
19 that there is seldom a third party with an interest
20 to complain.

21 There is seldom a third party
22 who has any harm to complain of. So that the police
23 must discover these offenses themselves, they must
24 adapt certain technique, and the proof is difficult
25 to make. Proof of trafficking is difficult to
26 make directly.

27 Now, as I say, it is not my
28 position to justify, or attempt to explain beyond
29 that, but I mean that I think that this is, and
30 I can only assure you, this is one of the features

1 of the present legal situation, which we have to
2 note, and emphasize.

3 THE PUBLIC: Is this burden of
4 proof position contradictory to the present law?

5 THE CHAIRMAN: I wouldn't
6 express an opinion on that. It hasn't been
7 challenged under the Bill of Rights, but I
8 wouldn't express an opinion, and I can't express
9 an opinion here.

10 Gentleman at the microphone.

11 THE PUBLIC: Thank you, sir.
12 Can the Commission give us any information as to
13 the present sources of origin of cannabis sativa
14 (marijuana), hashish, Indian hemp.

15 THE CHAIRMAN: Well, again you
16 see, this is a fact on which we must report to the
17 best of our ability, at the interim stage, and
18 at the final stage, and it is difficult for us
19 to make any statements on that here tonight.

20 Perhaps I can say this much;
21 that I think it is pretty well common knowledge
22 that one of the problems here is that

23 we are given to believe that a lot of the
24 people who are most concerned about the offense
25 of simple possession, are involved to some degree
26 in trafficking.

27 In other words, it is not so
28 easy in the case of cannabis, to make clear
29 distinctions between simple possession and
30 trafficking.

1 It may be that a distinction
2 should be made with respect to trafficking. But
3 the picture is far from clear-cut, and particularly
4 with respect to cannabis, and we certainly have reason
5 to believe that a lot of users, if you wish, are
6 involved in what the law defines as trafficking.

7 So that this is a matter of
8 considerable consequence. It is a very complicated
9 factor in the situation. I don't think I can go
10 further than that on the subject of supply, and
11 distribution, at this time.

12 We have come to hear you, you
13 know, and I know it may be disappointing to some
14 people, but our function is not to really furnish
15 information.

16 THE PUBLIC: Thank you for not
17 answering my question. I want to know who is going
18 to make all the money by selling it.

19 What I want to know is, who is
20 the pusher on the grand scale, not the little fellow
21 standing around the corner with a cigarette in his
22 hand. I want to know who is the fellow behind
23 making large profits.

24 I know something about the
25 question I asked you.

26 THE CHAIRMAN: I wonder if you
27 wouldn't tell us what you have in mind, because
28 your question does suggest you have some opinions
29 of your own.

30 THE PUBLIC: I have come to

1 learn, and to listen.

2 THE CHAIRMAN: We are competing
3 for that position.

4 I am afraid it is going to be
5 a stand-off. I have been, if anything, a little
6 more discrete than you.

7 The gentleman at the microphone.

8 THE PUBLIC: I wonder if it
9 is not politically possible for the legalization
10 of marijuana, and the transportation of marijuana,
11 until the United States does so?

12 MR. STEIN: Do you want to
13 expand on that?

14 Why do you wonder about that?

15 THE PUBLIC: Well, I just feel
16 that marijuana can't be legalized in Canada, until
17 really it is in the United States, because if it
18 was allowed to be transported around Canada, it
19 would be a little contradictory to the United
20 States, and we are the son of the United States.

21 DR. LEHMANN: Do you mean that
22 as a statement of fact, or as your personal
23 opinion?

24 THE PUBLIC: My personal
25 opinion.

26 Now, we are dependent on the
27 United States so much now, that we can't make a
28 step on marijuana until it is legalized in the
29 United States.

30 THE CHAIRMAN: What is your view

1 on the merits of the case?

2 Putting aside for the moment
3 what you may think is political difficulties, what
4 are your views on the merits of the question?

5 THE PUBLIC: I would say that
6 the Commission isn't going to be any use, because
7 it can't be legalized practically in Canada, until
8 it is legalized in the United States, because we
9 are so dependent on the United States.

10 DR. LEHMANN: Canada makes its
11 own laws; it always has.

12 THE PUBLIC: Well, that could
13 be.

14 THE CHAIRMAN: Lady at the
15 microphone.

16 THE PUBLIC: The young man may
17 be interested to know
18 they were a little concerned down in the United
19 States that they would have, if Canada legalizes
20 drugs, that they will have to do it, and in fact,
21 some of the young people down there think you have
22 already done it.

23 Dr. Morton Shulman was on one
24 of the programs, and speaking about the Commission,
25 and I think the young people didn't really hear,
26 they weren't really listening about that.

27 But in your trips in the country,
28 are you going to New York, and the Bronx, and
29 really get what the studies are down there?

30 Not from the , you know, the

1 doctors and the people with degrees, but the people
2 who have been addicts?

3 I think you would get rather
4 educated if you listened to someone like W.L.I.V.
5 and the "Long John" program, and you would really
6 get an idea what the drug situation is like.

7 If you knew how much, in
8 New York, it is legal to have a certain amount of
9 marijuana in your possession. Do you know if
10 that is a fact?

11 I think it is, and I don't
12 know how much it is, but it doesn't seem to have
13 cured the marijuana pushers.

14 THE CHAIRMAN: Well, what
15 will we learn about the addicts in New York? What
16 are your views on the subject? You must have some.

17 THE PUBLIC: I certainly have
18 a page of them, but I don't think the young
19 people really want to hear them.

20 THE CHAIRMAN: Why don't you
21 try them?

22 THE PUBLIC: Because I am not
23 an eloquent speaker, for one thing, and I am
24 scared.

25 But I was listening, like the
26 last two Sunday nights, to W.L.I.V. and it is
27 called "Drug Scene, the Bad Scene", and I am
28 wondering, here in Canada, would we want to, say,
29 five or ten years from now, hear pleading
30 residents of Harlem and from Harlem, pleading to

1 get this monkey off our back, this drug business.

2 This man ' did say it, he
3 said the only way with education is by drug addicts
4 that have been going into the school, not these
5 professors that have learned it by books, but by
6 people who, you know, that know what it is all
7 about.

8 I just wouldn't want it to
9 happen here in Canada, that we would have to feel
10 despair, and feel that there isn't anything we
11 can do now about it.

12 This is the way some of the
13 speakers ---

14 THE CHAIRMAN: Is that the
15 way you feel?

16 THE PUBLIC: No, not now, but
17 I don't want it to happen here. But I would if
18 I lived in Harlem.

19 THE CHAIRMAN: What do you
20 think the approach of it is, is it law?

21 THE PUBLIC: I imagine
22 education for one thing.

23 And I don't think we are ready
24 for it, and I don't think you should throw kids
25 in jail.

26 I don't know the answer, but
27 I sure don't want to see lives destroyed in a
28 whole community, really taken over by the drug
29 scene.

30 And I have some more names here

1 I will give you after in an interview.

2 THE CHAIRMAN: Thank you.

3 Gentleman at the microphone.

4 THE PUBLIC: Mr. Chairman, the
5 first thing I would like to say, is I am getting
6 a little sick and tired of the so-called "generation
7 gap".

8 I don't think there is any
9 generation gap between you or I, and I don't
10 think, and we don't class ourselves in a class
11 generation gap between our grandparents and our-
12 selves, and there is no generation gap as far as
13 I am concerned between teenagers, and young people
14 and myself.

15 I have five children, I have
16 three teenagers, and I am not speaking from lack
17 of knowledge in that regard.

18 If you speak to your teenagers
19 they will speak to you, so there is no generation
20 gap, as far as I am concerned.

21 This generation gap thing is
22 just an excuse for people to evade certain issues,
23 and certain questions.

24 Now, getting back to the
25 subject at hand, which is the non-medical use of
26 drugs, firstly, seventy percent of prescribed
27 drugs in Canada, are used by thirty percent of
28 the population.

29 Now, some gentleman, Whitehead,
30 mentioned earlier, with regard to the use of

1 tranquilizers, amphetamines, etc., barbiturates,
2 and that with the population.

3 Well, I think that he will
4 find that as people get older, once they pass
5 forty, that is the time when they get more
6 around to using tranquilizers, amphetamines,
7 barbiturates, etc.

8 But for medical reasons. Not
9 for -- to go on a flight, or take a trip, etc.
10 Whatever you want to call it.

11 Getting back to the cannabis,
12 I think the way, from the knowledge we have up
13 until now, with regards to it, I think that there
14 should be some legislation made, whereby a young
15 person who is caught carrying cannabis, or caught
16 in the use of marijuana and that, they should not
17 be charged as a criminal, and have it on their
18 record for the rest of their days.

19 We all have, at one time or
20 another, as we get older and go back and think
21 about things we did in our youth, and that, we can
22 all remember smoking corn silk, etc. And our
23 parents thought that was terrible at that time,
24 and had there been a conviction against smoking
25 corn silk at that time, I am afraid a lot of us
26 today would have a very serious list of crimes
27 against our record.

28 So I think it is the same
29 thing that is happening today, that young people
30 experience.

1 Experiments in the right
2 direction are commendable, and should be pushed up,
3 and helped along.

4 But unfortunately, some of the
5 experiments that have been going along, especially
6 with marijuana, I am dead against it, but I can
7 see the young people doing this because when we
8 were young -- we were younger -- I am not going
9 to say we were young, I am still young, but when
10 we were younger, we also did things that were
11 classified as experimentation, but fortunately a
12 lot of these things we were fortunate to get
13 away with.

14 But the main thing I want to
15 say, is the fact that I think marijuana, or
16 cannabis, should not be an indictable offense
17 against the person put on the record. That this
18 should be tried, the law enforcement agencies should
19 definitely try harder to stop the pushing of it,
20 the growing of it, and the sale of it, because we
21 are all aware of the fact that you cannot buy it
22 legally.

23 You cannot buy it legally. If
24 it is illegal to be sold, then it has to be a crime
25 against the law.

26 This is the main thing, as far
27 as I am concerned, that the young people, especially
28 in their formative years, when they are growing up
29 and experimenting and that, they want to go along
30 with the game, and someone gets caught, and they

1 turn around and they have this on their record for
2 the rest of their lives.

3 And another ten or fifteen
4 years time, that could have some, or cause some very
5 serious effect to a person who is trying to get
6 ahead, if once they have a criminal record.

7 We know what it is like to try
8 to get ahead in the future with that.

9 MR. CAMPBELL: Is your objection
10 to marijuana, an objection based on the fact that
11 it is against the law, or do you have objections to
12 the drug beyond that?

13 Are there characteristics to
14 the drug, or characteristics of the effects of
15 marijuana, that lead you to oppose these drugs?

16 THE PUBLIC: I have an objection
17 to it, firstly it is against the law, and secondly
18 I object to marijuana because of the reports that
19 we receive. They seem to indicate that the use
20 of marijuana could lead to going higher onto the
21 hard drugs.

22 That is the problem.

23 THE CHAIRMAN: What was the
24 effect of corn silk?

25 THE PUBLIC: The effect of corn
26 silk was the fact that you got grounded, you didn't
27 go on a trip.

28 You went through a trip, and
29 there was quite a little room that they had.

30 That was about the only effect of corn silk,

1 but from what we read in the newspapers, and all
2 the newspapers, and that the effects of marijuana
3 are entirely different, and every week you are
4 reading where some young person has turned around
5 and committed suicide, or had something else
6 happen to them, due to smoking marijuana, due to
7 having what they call a "bad trip".

8 And anything like that, I am
9 against.

10 I am against anybody driving
11 a car ninety miles an hour.

12 DR. LEHMANN: There is very
13 little evidence, really, that any suicides have
14 occurred because of a bad marijuana trip.

15 THE PUBLIC: Well then, we
16 will add LSD, lysergic acid for a change.

17 Some people apparently get
18 a trip either way.

19 DR. LEHMANN: Now, if there
20 would be no legal obstacle, as Dean Campbell just
21 proposed for a moment, how would you feel about
22 your own teenage children?

23 Would you oppose their smoking
24 marijuana, or would you leave them alone, and
25 make their own decisions? And why would you
26 feel the way you feel about it?

27 THE PUBLIC: Well, from the
28 present information that I have, I would definitely
29 be against them smoking marijuana.

30 DR. LEHMANN: Why?

1 THE PUBLIC: Why? Because of
2 the results and that, that we read in the news
3 media, rightly or wrongly.

4 DR. LEHMANN: That would mean
5 there would first of all have to be information
6 through the news, which is always reliable.

7 THE PUBLIC: You know we live
8 in the best country in the world, but it still
9 isn't Utopia, and until that happens we won't
10 have a Utopian news service.

11 DR. LEHMANN: Would you think
12 that much of the problem then, is due to the
13 fact that wrong information is being disseminated
14 through the news media, and that is why there is
15 such a discrepancy in the attitude of the two
16 generations to the drugs?

17 That one generation relies on
18 the news media, and the other one doesn't?

19 THE PUBLIC: No, I think that
20 a lot of the news commentators, and the editors
21 and writers, are just as confused and mixed up
22 as we are with regards to it.

23 THE CHAIRMAN: I'm sorry, I don't
24 want to make an unpopular announcement, but I am
25 asked by the fire marshall to state that smoking
26 is prohibited in the auditorium. Any kind of
27 smoking.

28 THE PUBLIC: Is there anything
29 further you wish to ask me?

30 THE CHAIRMAN: Yes.

1 Would you approve reliable
2 information about drugs being given out in the
3 schools, at a fairly early age, in a form that
4 can be assimilated, depending on age, but would
5 you approve of telling it like it is, as they say,
6 in the education system, on drugs?

7 THE PUBLIC: Yes, definitely.

8 Unless you have the
9 information between all stratas of the society,
10 and all age groups, we can't arrive, or be able
11 to assess these different problems, and I am in
12 favour of starting the education of drugs and that,
13 at the earliest ages, the earliest grades.

14 We start at grade one, or grade
15 two, and go right through.

16 You can't get too much information
17 in things like this.

18 THE CHAIRMAN: Thank you.

19 Gentleman at the microphone.

20 THE PUBLIC: Sir, I am trying
21 to get a little information from you as well.

22 THE CHAIRMAN: Here we go
23 again.

24 THE PUBLIC: Yes.

25 THE CHAIRMAN: I will probably
26 list this one.

27 THE PUBLIC: Well I hope you
28 don't.

29 Mr. Chairman, in your terms of
30 reference as such, do you consider as part of your

1 policy, any report to incorporate any statement to the
2 effect as to what particular groups, in your experience,
3 are pushing, and who are supporting the use of this
4 substance?

5 THE CHAIRMAN: Yes, we have got
6 to get to the bottom of the distribution system, to
7 the best of our ability.

8 I don't mind disposing, right here
9 and now, that it is not easy, for reasons that you
10 can probably imagine yourselves.

11 But we are acquiring some
12 impressions, and some information, and I believe we
13 have some distance to go yet on that subject.

14 Occasionally we get windfalls of
15 information, but there is another thing about it.
16 We have no reason to believe it is a static situation.
17 In fact, we have every reason to believe that it is
18 a very shifting, changing, one.

19 Some people may, by the accident
20 of arrest, be replaced on the market by an entirely
21 different type of people. It is difficult to pin
22 down.

23 But let me put this to you, if I
24 may, ask you a question now.

25 Supposing there was evidence, and
26 I say supposing, that leaving these drugs, any one
27 of them, on an illegal basis, would lead inevitably
28 to organized crime taking over the distribution.

29 What would be your conclusion
30 about that, from that, as to whether they should be

1 left on an illegal basis?

2 Would that possibility, or even
3 if the evidence could be shown, would that
4 inevitability influence your judgment, as to
5 whether these drugs, or any one of them, should be
6 left on an illegal basis? I am asking you.

7 Yes, it is an important judgment.
8 Yes, I am asking you. What would be your reaction
9 on the basis drugs were to be left on an illegal
10 basis could you believe that organized crime would
11 take over the distribution of these drugs?

12 THE PUBLIC: I want to point
13 out, in your own point of address here, you pointed
14 out this was a relatively young audience, did you
15 not?

16 THE CHAIRMAN: Yes.

17 THE PUBLIC: Right. At least
18 we agree on that point.

19 Now, under the circumstances,
20 I don't think the question and the way in which
21 you put it, is a fair one, because this audience
22 is not in a position to judge, or to evaluate, or
23 to express an accurate opinion on that subject,
24 which is better put to a better trained and better
25 -- older age group.

26 THE CHAIRMAN: I put it to
27 you.

28 THE PUBLIC: Your question is
29 not one which should be accurately
30 answered by a group of this type.

1 THE CHAIRMAN: I put the
2 question to you.

3 THE PUBLIC: You can put anything
4 you like to me, and I am not obliged to answer.

5 THE CHAIRMAN: I am glad we
6 have got that point cleared up.

7 THE PUBLIC: Right. I am
8 certainly not impressed, sir, with the spirit in
9 which you are conducting this inquiry.

10 THE CHAIRMAN: I am sorry about
11 that.

12 THE PUBLIC: This is an inquiry,
13 not an inquisition, and if you try that game I
14 think I have a few years on you, my boy.

15 THE CHAIRMAN: I will concede
16 that too.

17 The gentleman at the microphone
18 over there.

19 THE PUBLIC: Excuse me, sir,
20 if we are not capable of making our judgments
21 for ourselves, does that mean you were?

22 THE PUBLIC: Good fun. I never
23 thought I would have so much fun this evening.

24 Well, the answer might -- who
25 was the last gentleman that spoke? Do you mind
26 asking that question again?

27 Do you mind repeating your
28 question again?

29 THE PUBLIC: It appears to me,
30 that you think we are a bunch of long-haired people

1 that are not capable of using our own judgment.

2 Is this correct?

3 THE PUBLIC: No, no, no, you
4 get me wrong.

5 It is up to you, it is your
6 business, not mine.

7 All I am saying is that I am
8 looking at this from an older point of view, if
9 you are gracious enough to accord to me, sir. Thank
10 you very much.

11 And all I am saying, that from
12 the point of view of a person of my age, I view
13 this position differently, and I am not trying to
14 express, or force my views upon you.

15 I am simply stating that I am
16 prepared to discuss this particular aspect with
17 individuals my own age, before an audience of which
18 the average age is that of my own, that's all.

19 I am not wishing to force my
20 views upon you in any way whatsoever.

21 This is a Commission of Inquiry,
22 and I am inquiring.

23 THE PUBLIC: If you are inquiring,
24 why are you not sitting up there, sir?

25 THE CHAIRMAN: Lady at the
26 microphone.

27 THE PUBLIC: Sir, I would like
28 to make a recommendation, as a parent, and I
29 strongly support Mr. Perry's recommendation that
30 drug information should be divulged at the earliest

1 age possible, and that the child afford the ability
2 to assimilate it can do this very thing.

3 I think this is extremely
4 important, at all levels.

5 Furthermore, when Mr. Perry was
6 speaking about marijuana being used, I think,
7 according to the information in Halifax, that the
8 marijuana, or some of it, that has been analyzed,
9 has been found to contain serious harmful parts.

10 Whether marijuana is or not,
11 I don't want to discuss that. However, I understand
12 that they have found strychnine, which is in rat
13 poison, and such things as this.

14 And for this very reason, I think
15 as a parent, that take the child as young as you
16 can, and tell him the facts as we know them, and
17 I would like to make this recommendation.

18 And if any of our youth here
19 can please give any ideas, or constructive criticism
20 on why the parents aren't here, if it is lack of
21 interest, or what, I am sure the parents that are
22 here would welcome it tonight.

23 Thank you.

24 THE CHAIRMAN: Thank you very
25 much.

26 You made me think of something
27 which Dr. Segal said this morning, and I meant
28 to ask him about the evidence of that.

29 I hope he doesn't mind if I
30 ask him. He is here tonight.

1 I think, marijuana was
2 found with strychnine, and I think that you mentioned
3 a lighter fluid and alkaloids.

4 DR. SEGAL: Lighter fluid,
5 ergo-alkaloids, and possibly DMT and/or depressants,
6 or speed.

7 THE CHAIRMAN: Where was this
8 verified, as a matter of fact? Where was this
9 discovered?

10 DR. SEGAL: Right here in the
11 Food and Drug Laboratories.

12 Specifically ergo-alkaloids.

13 MR. CAMPBELL: On marijuana?

14 DR. SEGAL: On marijuana.

15 THE PUBLIC: This was brought
16 out at a drug symposium at Dalhousie in March,
17 that this actually had been found in the drug
18 analysis.

19 THE CHAIRMAN: Thank you.

20 The gentleman at the microphone
21 there.

22 THE PUBLIC: If I may be
23 permitted to reply to the inquiry.

24 I think it is difficult for us
25 to turn to our elder generation because they do
26 not precisely have the information as to the
27 effects and so on, of these drugs.

28 I think the only source of
29 information is the people who actually tried these
30 drugs, the contents for the non-medical use.

1 And then I think the gentleman
2 was referring to underworld connections to the
3 distribution of these drugs.

4 Marijuana is unlike heroin is.
5 It is rather unprofitable for you in a way. In
6 other words, heroin can be shipped in very small
7 quantities, and so on, and provide a very important
8 profit in very small bulk. In the case of cannabis
9 for instance, it has to be shipped in very large
10 quantities, at least, and does not produce the
11 effect that we know heroin ^{does} toward addiction.

12 So I strongly -- and I have
13 strong doubts as to the connection between the use
14 of marijuana, with the use by the mafia and other
15 organizations.

16 Another thing I wanted to
17 bring up, I heard the word addict used. We are
18 talking about the non-medical use of drugs, and it
19 is important to make a distinction of which we
20 are all aware, between drugs that, well, there is
21 a whole gamut of drugs, of course, and we have to
22 know exactly what level we are speaking.

23 I think we can all say, with
24 a fair amount of assurance, that there is a class
25 known as, drugs known as -- that produce effects
26 known with heroin and morphine, which are definitely
27 very dangerous, harmful to society, and there are
28 other classes of drugs which do not have these
29 characteristics, and I think it is confusing to
30 associate those, and lump them in the same class.

1 And I think this is the situation that exists at
2 present, with American and Canadian law, the
3 penalties associated with marijuana are just
4 as strong as the ones associated with heroin, if
5 I am not mistaken.

6 And I would like to know. The
7 distinction has to be -- we have to ask a government
8 to separate the two, marijuana and heroin, and
9 radically change the laws, the penalties involved
10 with the use of these drugs.

11 THE CHAIRMAN: Thank you.

12 THE PUBLIC: I would like to
13 say, as an adult, that we are sure not supporting
14 our young people at all.

15 It is not fair for us to hide
16 behind them. There is a large number here, of
17 young people, and a very small number of older
18 people, us the adults, and the ones that are here
19 -- well it is very nice to have them.

20 But what happened to me here
21 a couple of weeks ago, across the harbour, I will
22 say, this young chap came to me, he was on drug
23 problems, and he asked me to help him, as I do
24 from time to time.

25 It is difficult to help these
26 young people if there is no place that really --
27 they want these young people to go to help, or a
28 whole place, a whole gathering, or meeting, or
29 whatever you want to call them, to help these
30 young teenagers.

1 And I went to his house, and
2 spoke to his mother, and she said, "Oh no, oh no,
3 my son is not on drug problems. You are making a
4 mistake. You had better get out of here." And
5 she closed the door in my face.

6 So there goes the show, that
7 adults are hiding behind teenagers. They are not
8 willing to admit this.

9 And what has the teenager got
10 to do, to please the old people? When the short
11 skirts came along, it was terrible.

12 Then skirts got longer, and the
13 coats, and the granny glasses, and that was
14 terrible.

15 Then they came along with long
16 hair, and beards and what not, and that was
17 terrible.

18 So after all, what have they
19 got to do to please us? They don't tell us how
20 to dress. Why should we tell them?

21 THE PUBLIC: It seems to me
22 that we are getting sort of off the topic, and I
23 was in this afternoon with you, and you asked why
24 do people turn on.

25 And I think that the thing here
26 is, it is a social thing, whereas the same as
27 taking a liqueur after dinner. I will draw the
28 line there, smoking one or two joints of grass
29 is the same as that.

30 And there is a difference also

1 in all the drugs you take. Everybody seems to
2 think that if you smoke grass you get a little bit
3 high, you take acid you get higher, with heroin you
4 know, sort of go out of your mind.

5 But the thing is, if you get all
6 a different type, and this was brought out this
7 afternoon.

8 Also, I was wondering if you
9 have ever thought of drugs as sort of a sixth
10 sense.

11 And to draw an analogy, if you
12 are sitting in front of a fireplace with your eyes
13 closed, you can feel the heat. You can hear the
14 crackling of the fire. It is a pleasant surrounding.
15 When you open your eyes you have the presence of
16 the light.

17 I think that from drugs, that
18 the experience is ^{not} that different from sitting in
19 front of the fire with your eyes closed and
20 experiencing the world the way it is this way, on
21 drugs.

22 This is what I think is the
23 main thing. It is so beautiful.

24 I was just wondering if you
25 thought of it in this way?

26 THE CHAIRMAN: Thank you.

27 Gentleman at the microphone.

28 THE PUBLIC: What I was going
29 to say, has been said by two gentlemen before me,
30 that I think one of the major questions is to make

1 this distinction.

2 We were
3 talking a moment ago about drugs as though it was
4 one, the one thing so to speak, make a distinction
5 between marijuana and the harder drugs like heroin.

6 Now, there should be a great
7 emphasis put on this distinction. It seems, as
8 far as I can make out, that marijuana is not harmful,
9 is not addictive, and the rest of it. This is at
10 least indicating a point in this direction.

11 If this is the case, my feeling
12 is the government should take cognizance of this
13 difference in terms of the Criminal Code it should
14 be changed I think it is foolish to create what
15 amounts to a purely legalistic criminal subculture,
16 within society, for no reason at all.

17 The question of whether or not
18 legalization should come about, is the question of
19 legalization of marijuana mainly.

20 Now, later if we wish to consider
21 legalization of the harder drugs and control, and
22 then legalization, then that's a different story.

23 But first things first, marijuana,
24 it seems that the least offenses seem the most
25 desirable. This is mainly what I wish to say.

26 As far as this business about
27 finding that marijuana has been adulterated with
28 certain admittedly harmful substances, if it
29 were legalized and controlled, then presumably it
30 could be distributed some way in a purer form.

1 This is all I have to say.

2 THE CHAIRMAN: Thank you.

3 THE PUBLIC: I have two points,
4 one of which I have been asked to raise, not my
5 own point, I have been asked the question, if
6 marijuana is legalized, is there any sort of
7 legal precedent for erasing the criminal records
8 of people who have had, or obtained, criminal
9 records through marijuana convictions?

10 Is this sort of a recognized
11 procedure in the Canadian legal structure?

12 MR. CAMPBELL: Not being either a
13 lawyer, or a historian, I am afraid I don't feel
14 technically able to answer the question, except
15 to say, to the best of my knowledge, no.

16 I don't think there is a
17 precedent for this. A criminal record is a record
18 of acts in violation of the law, as the law stood
19 at that particular point in time.

20 And my understanding is, that
21 this is simply a record of violations of the law
22 where individuals are found guilty, and the
23 penalty assigned.

24 This is the criminal record.
25 If you change the law tomorrow, for instance, with
26 respect to robbery, it is no longer a crime, that
27 would commit robbery up to those dates would still
28 have a criminal record.

29 But I think a criminal
30 lawyer is better able to answer.

1 THE CHAIRMAN: I would agree
2 entirely with that statement, and all its particulars,
3 and I don't think it is simply a question of
4 record. It is a question of the fact of conviction,
5 and one can never block out the fact of conviction,
6 and if one is asked the question in the future,
7 whether one has been convicted on a particular
8 offense, one would have to say truthfully, yes.
9 And that is the issue really.

10 And there is no way that that
11 can be, that I know of, obliterated.

12 Now, the central record, there
13 is a proposal that records of conviction be destroyed
14 after a certain period of time. I don't know what
15 will happen with that proposition, or that proposal.

16 But I think, as Dean Campbell
17 says, we deal with the consequences of the law,
18 as it exists, and there is no precedent that I
19 know of in Canada, for trying to do something to
20 blot out the past, because of a change in the law.

21 Not until it is decided at some
22 later time, that the law should be changed.

23 MR. CAMPBELL: I think we would
24 have a problem if we -- at the Commission's
25 recommendation, which is the removal of a record
26 after five years, if it was implemented it would
27 seem to me that another country, for instance on
28 a visa application, or citizenship application,
29 could still ask a question, "Have you ever been
30 convicted of an indictable offense?" and there

1 you would look at their jurisdiction. And I think
2 you would have to, if you had such a record, say
3 yes.

4 So you can run into a case
5 here, where even a change in Canadian posture
6 might still create embarrassment for a person
7 in other particular situations.

8 THE CHAIRMAN: There are
9 changing views of the seriousness of offenses. Of
10 course a change in the view, fundamental change
11 in the social view of an offense could have a
12 bearing on the seriousness in which past offenses,
13 convictions, would be regarded, and this is very
14 much a problem of society's response.

15 I mean, the attitude towards
16 a criminal conviction after a person, as they say,
17 paid his, or her debt to society, discharged it,
18 paid the penalty, what happens after that is
19 very much a matter of social attitudes. . . It is
20 not a matter only to be handled by legislation,
21 it is a matter of the communities general willingness
22 to let a person rehabilitate himself.

23 Now, that is a deep matter in
24 which we, as Canadians, transcend this particular
25 issue. It is involved in it. It applies to all
26 offenses in Canada.

27 THE PUBLIC: The second point
28 I wanted to cover, is, again, with this particular
29 subject there are so many factors which affect
30 the subject, but that are not confined to it, and

1 the principal one I want to get at now, is the
2 communication, and information, which in my
3 experience in talking to high schools, junior
4 high schools, parents groups, all sorts of groups
5 around the Province, the universal common denomin-
6 ator is fear, and lack of information, accurate
7 information.

8 And one of the very interesting
9 things that came out of Dr. Whitehead's study, is
10 the sources of information on drugs. And on the
11 most part, these are friends of the person getting
12 information, and the media.

13 And it has been my experience,
14 and perhaps Dr. Segal might add something to this
15 too, that the media, particularly Nova Scotia
16 newspapers, are highly inaccurate.

17 And one of the problems is, I
18 understand, some of the technical difficulties is
19 you have to know somebody who has some accurate
20 information on the subject, and there are a few
21 people in the Province who have more information
22 than the average man on the street.

23 Now, we have run into this
24 problem, again and again. Who is going to educate
25 the educators? And we are getting down to the
26 point now, where those of us who have been
27 travelling around the Province doing this kind of
28 drug education, are being run ragged.

29 You know, seven days a week
30 type of thing, and all that is sort of a puddle

1 in a bucket. It is not getting anywhere in
2 particular, it is not reaching enough people.

3 Even if we did have all the
4 accurate information available, how do we get it
5 out to the people. And this applies not only to
6 the information on what a drug is, and what it
7 does, but what are the laws against those drugs.

8 For instance, a change in the
9 Canadian law in August of 1969, still leaves me
10 quite confused, as it did one of our local magis-
11 trates here not long ago.

12 And this type of communication
13 problem, which is not restricted to the drug
14 field, but because of the increasing complexity
15 of the technological things, we are running into
16 the problem where it is getting very difficult to
17 get the kind of information we want, on any
18 subject.

19 THE CHAIRMAN: It is a very
20 difficult problem, which we are trying to figure
21 out ourselves, and any advice, any suggestions
22 that you can give us, would be very welcome.
23 Because one of the problems we see, as you say,
24 one of the problems you see here, is on the one
25 hand because of a lack of information one might
26 be prompted to say, "Well almost any information is
27 better than none." but we know this is not true,
28 particularly with respect to the effects.

29 And the issue about the
30 effects, has become so complex and controversial.

1 I mean, when scientists can't
2 agree, as we very well know, and are learning to
3 our dismay, how much controversy and conflict and
4 respectable opinion there is on basic issues,
5 then you can't easily conceive of this being
6 done adequately at a local level, without some
7 co-ordinated system, some authoritative source
8 of information, where you can get sort of a national
9 consensus as to what is going to be regarded as
10 information.

11 Quite frankly, we are trying
12 to figure this out. What is the relationship of
13 it, what is the role of the Federal Government
14 here?

15 What is the role of the
16 Provincial Governments, and more, local organization?
17 Where is this accurate scientific information to
18 be developed in the country? Where is it to be
19 originated, and how is it to be transmitted?

20 As you say, the widening in
21 time. It is the scientific information you need.
22 I mean we welcome any ideas on this.

23 Meanwhile, you have to use what
24 is at hand.

25 Now, there are,
26 fortunately, some very, very good things, and for
27 example, this may be a bit premature on my part,
28 but we feel that we received a great deal of
29 assistance on this subject by the Canadian Medical
30 Association in Montreal, and the position paper

1 prepared by Dr. Unwin, is a most helpful document
2 on this subject.

3 Now, in its turn, it may be
4 subject -- no doubt we will see in time it is
5 probably subject to some qualifications and
6 criticism from others, but certainly it is our
7 impression, to the best of our ability from what
8 we know now, that it is a most helpful contribution
9 to knowledge on the subject.

10 I just mentioned this, you know,
11 and it has been published in the C.M.A., and we
12 ourselves may, if we can, bring it out as an
13 appendix, perhaps. We haven't made a decision
14 precisely on that.

15 But what you say is so true,
16 in the problem.

17 You see, when you are told you
18 can do more harm than good, by inaccurate information,
19 and let's face it, this is a more and more sophisticated
20 community we are talking about.

21 There are people in this room,
22 who are very well informed on drugs, and drug
23 effects, and we are sure, and in certain aspects
24 they may be more informed than the Commission. So
25 when you are in a sophisticated community, your
26 information has to be very reliable.

27 I mean, it is a moral duty, anyway,
28 but it will soon be found out, and it will be
29 discredited, and so it is a very tough problem how
30 we organize ourselves in this country, to lick this

1 problem of information, and communication.

2 Have you any ideas of what the
3 national role should be?

4 THE PUBLIC: I think one of
5 the things the government could do, is we have
6 now a possibility of computerized information.

7 I understand the legal profession
8 is following along the techniques of business,
9 where information is computerized in a central
10 headquarters, and spread out through telex.

11 Would it not be possible to have
12 a national information distribution centre, where
13 what type of information you want, you punch into
14 a machine, and it comes back. It is an expensive
15 proposition, but it has a phenomenal number of
16 possibilities.

17 So that what I would envision,
18 is in each Province there is a Federal Branch of
19 this central information gathering place, and
20 that Branch is to gather information on its own,
21 and record it centrally, so that in each area right
22 across the country you could go in, ask for a
23 particular amount of information which is shot
24 into a computer, and comes back out as up to date
25 as possible.

26 Well, again, you find there are
27 a lot of technical problems with that, but I think
28 unless we start capitalizing on the advancements
29 made in other fields, we are not going to get
30 very far.

1 This applies equally to, certainly
2 the difference. For example the difference between
3 quality of television commercials, and the quality
4 of television programs. It is entirely a matter of
5 the sophistication and the techniques used.

6 And you know, if we can use
7 the techniques of that, maybe we could get more
8 done in a winter on T.V. than they could in years
9 of open discussion.

10 This is something moved on the
11 strength of drug education, but this is done so
12 often, where you get, yes, good guys, bad guys,
13 where everybody goes away thinking the same things
14 as they did when they came there.

15 We find this most often when we
16 go out publicly, and people get upset, as not
17 playing that game. We are giving information as
18 straight as we know it, and they say we don't know.

19 But this kind of fear comes
20 back, and I think we have to get to start to pin
21 things down more than with the mass distribution
22 of watered-down pamphlets.

23 And secondly, movies, which are
24 fairly uncommon.

25 DR. LEHMANN: Would you think
26 then, that the main problem is dissemination, or
27 availability of correct information, or the
28 availability of people who can provide this
29 information?

30 You started out by saying that

1 you, and one other person who are doing the
2 teaching job in this Province, that you simply
3 can't handle it.

4 There is just too much to be
5 done, as though there is no one else, and there
6 are very few of such persons available.

7 On the other hand, availability
8 of information as such, I can't really see why one
9 would have to have computers. Whatever acceptable
10 and generally agreed upon information there is, is
11 assembled fairly well.

12 There is, of course, always the
13 question of the judgment, how accurate is the
14 information. You see this in films and panel
15 discussions on alcohol. There was plenty of alcohol
16 information available for years, and still attitudes
17 enter into it how you evaluate it.

18 Now, would you consider the prob-
19 lem of having more teaching strength, or having
20 more information available?

21 THE PUBLIC: Well, it is very
22 hard for me to say which has a higher priority,
23 because one without the other is rather useless,
24 if you follow what I am getting at.

25 If we have the information, and
26 no one is spreading it out, then it is not much
27 use to us, apart from the fact that knowing that
28 today ---

29 THE CHAIRMAN: Do you find it
30 difficult to get the information? I just wonder

1 why you implied this.

2 THE PUBLIC: To a certain
3 extent I do.

4 It means largely doing a lot
5 of homework. At the same time, you are trying
6 to spread it out.

7 I am not claiming, and I want
8 to correct this, there are not just two of us
9 doing it. There are quite a number of people in
10 the Province, but even then the work load is
11 very heavy, and even knowing some of these people
12 we ourselves feel it is very hard to keep up with
13 the kind of information, and occasionally we
14 get feeling we are just not adequate to cope with
15 the complexity of the problem, and it is very
16 difficult to talk about drug education, without
17 talking for a few hours. It just starts.

18 And to take a very complex
19 subject like this, and translate it into terms
20 to be understood by a small rural community in
21 Nova Scotia, is a real problem.

22 This teacher problem is one
23 side of it, the other side is getting your fingers
24 on the latest up to date information.

25 DR. LEHMANN: That is why I
26 would question it, as a problem, where you know
27 the latest chromosome breaks on LSD, or maybe
28 other information may be out tomorrow that proves
29 the opposite, and another day another one that
30 again goes against it.

1 To keep a score board is not
2 really necessary. The important facts, which are
3 of practical realistic importance, are not so
4 difficult to come by.

5 I can't see where the problem is.

6 THE PUBLIC: There is that side
7 of it. Certainly even in your eyes you are speaking
8 in generalities about you can break down the
9 various types of drugs, your solvents, barbiturates,
10 tranquilizers, over the counter drugs, down to
11 hallucinogenics, and start talking about each one
12 separately instead of lumping them all into one
13 bag. And you can say certain things about those that
14 are known, and you can say certain things about those
15 that are controversial like the chromosome thing with
16 LSD.

17 You can say, "Well, we don't
18 know exactly what happens". We do know some people
19 say this, and some people say that, and that's about
20 as far as we can take it.

21 DR. LEHMANN: A rather active
22 principal of cannabis, is tetrahydrocannabinol one,
23 or tetrahydrocannabinol nine. Is that really so
24 important?

25 THE PUBLIC: The important type
26 of information. That is hard to keep up, things like
27 Dr. Whitehead's study, that takes a considerable time
28 to work through and absorb.

29 Now, as more of this kind of
30 information comes out, you have to sort of gather it in.

1 The kind of problem is, we don't have in Nova
2 Scotia yet, a simple drug information
3 centre. We have been trying to set one up now for
4 months.

5 But to go through all the
6 pamphlets that we have, and catalogues,
7 takes a considerable amount of time in itself, and
8 the problem is, who is going to screen / This means
9 -- someone may know something about it, and/kind of
10 screening has again, got to come from someone who
11 has gotten this up, and this is again from a person
12 who is twenty, or thirty groups after, and come to
13 talk to them about the drug problem. And on the
14 side of communication, I would just like to comment
15 on the parent's side.

16 One of the factors we find
17 when we attend groups, particularly outside Halifax
18 for some reason, we get a fair number of parents at
19 evening sessions. But in Halifax, I have yet to see
20 a drug education thing where parents weren't out-
21 numbered at least ten to one. And yet the parents
22 are the ones who get most up tight about it, because
23 the kids know more about it then the parents do,
24 and the parents don't show up to find out, but they
25 are the ones who start screaming to us.

26 It just gets downright
27 frustrating.

28 DR. LEHMANN: That is a
29 psychological problem, though.
30

1
2 What would you suggest we
3 do about it?

4 It is not just training more
5 teachers, or getting more information, it is to get
6 people motivated to want to be trained, to want to
7 learn.

8 THE PUBLIC: Well, you are
9 moving away outside just drugs, then.

10 I could toss a few things
11 off the top of my head, but I don't know how useful
12 it would be.

13 One thing I would try to
14 recommend, seems to -- again, the problem is how
15 do you get adults to talk to teenagers. That is
16 one of the crucial problems. Because there are,
17 you know, structural reasons on both sides about
18 why they don't want to talk about certain things.

19 They think the communication
20 gap, as it is called, it is not restricted to that
21 in particular, you know, adult-youth division. I
22 think it seems to be becoming more and more prevelant,
23 and people find it difficult to talk to each other.
24 Here is where I think things like human relations
25 training can be very useful.

26 But again, we are always
27 talking about more and more sophisticated techniques
28 in relating. And again, within a new technique you
29 have got to have trainers, and you have got to
30 start spreading it around.

1
2 It gets to the point where the
3 drug education thing, is a starting point, where you
4 wind up trying to solve the world's problems, in order
5 to solve what seem, initially, drug education
6 problems, and it evolves eventually, that the problem
7 really isn't drugs, the problem is people just can't
8 talk to each other, they can't get the information
9 going back and forth, and the drugs, the fuss about
10 drugs, is just a symptom of a general hostility,
11 or frustration.

12 So the serious type of question
13 I am interested in, is mental health, not drugs per se,
14 because I think that is one particular facet of,
15 you know, youth or adult activities, as a use of
16 drugs.

17 The kind of rationalization
18 of that, is really one facet of the type of comm-
19 unication problem that is going to be popping up
20 all over the place. Now, that again is tied into
21 things like the strains of living in an urban environ-
22 ment, where there is more pressure and fewer recre-
23 ational facilities.

24 Given that kind of sociological
25 principle, I would say if you put pressure on people,
26 and don't provide them with an outlet to release it,
27 to get rid of it, then they are going to find some
28 other outlet, and that may be drugs.

29 But again, that is, you can
30 say that in a sociological principle, but if that

fact is true depends on a sociological study to find out.

I suspect it is, but I don't have that evidence.

The way of getting to the so called drug problem, is to get at the other things, because these seem to be more important. Drug education is one part, but that is not going to stop a lot of the problems which are blamed and focus around drugs, but are really not the issue with drugs.

I am trying to make a big distinction there.

THE CHAIRMAN: Thank you.

Dr. Segal?

DR. SEGAL: First of all, I would like to say--what I would like to say is, I would like to direct a question to the parents, and this may stimulate some controversy.

But before I do that, I will let you make your comments first because this will start the parents off.

THE PUBLIC: Well, I would just like to change the subject for a minute.

We hear a lot about drugs that make you high, you know, this sort of thing. I was just wondering how much trouble do we have with the opposite extreme, things like barbiturates and these other drugs, that try to calm you down, instead of making you high?

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We don't hear much about this.
I was wondering, you know, what you gentlemen found out.

THE PUBLIC: Well, we know that enormous quantities are consumed in this country, more than can be required for medical purposes.

THE PUBLIC: Sir, if the drugs were legalized, and the government took it over, say, the product as a business, theoretically couldn't they get the purer stuff and sell it? And I found out somewhere that marijuana was not as harmful as liquor; and it could be sold on the same basis as liquor, or perhaps to even a younger age.

Like liquor is available to high school students. You see, not legally, but we can get it. It is so well known, any person in high school or junior high can get hold of marijuana, or the liquor itself. It is so simple, that the only thing stopping the kid, is either what the parents have told them or they have found out themselves.

Mostly the danger, such as marijuana, the ignorance of marijuana, or the ignorance of the effects of liquor, which prevents a lot of us from getting it later. You know, we only get it, say, in university, but most -- a lot of people get it in high school.

My sister is going to Dal, and she said that she had to ask kids, "Are you

1 high, or not?" This was just before examinations.
2 There are several students who are paying their
3 tuition, they are skiing, or whatever sports they
4 carry on, just by trafficking in marijuana.
5

6 THE PUBLIC: Gentlemen, it
7 would seem to me, the whole problem of this, partic-
8 ularly pertaining to marijuana, would be one solution,
9 possibly, during investigation of it, would be a
10 withdrawal from the Narcotics Control Act, and
11 placing it on a restricted drug level, which would
12 in reality make it sort of a responsibility of
13 medical opinion, which would be running concurrent,
14 say, with the experimentation.

15 This is perhaps the biggest
16 problem, is that really it is classed as a narcotic,
17 and the majority of opinion really is it isn't.
18 But this is just sort of, perhaps, one recommendation
19 that you might consider, withdrawing it from the
20 Narcotics Control Act, and say a lesser offense to
21 restricted drugs, say.

22 Thank you.

23 THE CHAIRMAN: Thank you.

24 Dr. Segal?

25 DR. SEGAL: Two main topics
26 of discussion today have been general concept of
27 education, and there was a paper presented this
28 morning, as I am sure there is a lot of evidence and
29 literature, about the positive value of the psychedelic
30 experience, and what could it do for an individual

1 from the pleasure side, and from insight into life.

2
3 Now, I would like to raise
4 a question of the parents here tonight, specifically
5 when they request education, because education seems
6 to be a very beautiful solution to everything.

7 The question I would like to
8 get some answers from the parents, directed to the
9 Commission, so they may have a better idea on how
10 to formulate their opinion on education is, what
11 kind of education do you want to give your kids?

12 You say you want the education
13 to be delivered at the earliest possible age. Now,
14 does this mean that you just want education about
15 the facts on the hazardous effects of drugs, or do
16 you want the controversies discussed before your
17 teenagers?

18 Do you want your teenagers to
19 hear about the positive values of drug use, the
20 positive values of those drugs used medically, and
21 the positive values of those drugs used non-medically?

22 Do you want your teenagers and
23 your youngsters to hear about the beautiful things of
24 the psychedelic experience that have been written by
25 individuals experiencing the psychedelic experience,
26 and the individuals here in the audience who have
27 experienced the psychedelic experience?

28 One of the major points, and
29 here you have got to remember that individuals have
30 used drugs when they got up at a microphone, or if

1 they got up before a school audience to talk about
2 their use of drugs, and their description of the
3 effects, put themselves in jeopardy of law?
4

5 Yet there are some of these
6 individuals who would be very willing to go into
7 the schools and talk about these experiences.

8 Now, what I would like to ask,
9 what type of information, hazardous, straight facts,
10 or the values of the non-medical use of drugs, when
11 these values can be spoken about?

12 THE PUBLIC: Could you speak
13 closer to the microphone?

14 THE PUBLIC: With the beautiful
15 experience on these psychedelics, would you have
16 experiences that would be so beautiful?

17 I am addressing it to Dr.
18 Segal.

19 DR. SEGAL: When I spoke of
20 the value, and the beautiful effects of the psychedelic
21 experience, I was directing the question to the parents.
22 I was not trying to have questions directed back at
23 me.

24 Now, just a moment please. The
25 point is, that there are controversies. There is a
26 huge literature which discusses both the adverse
27 effects of drugs, the adverse side, both from the
28 medical, psychological, moralistic, psychiatric,
29 the negative side of the psychedelic experience.

30 But there is also a tremendous

1 literature about the positive side of experiential
2 and existential psychiatry, and the value of the
3 experiential experience for the experience itself.
4

5 THE PUBLIC: I think you had
6 better use ordinary words.

7 DR. SEGAL: I am sorry you
8 don't understand me, but I would say ninety-nine
9 percent of the youth in this audience do know what
10 those words mean.

11 I don't want to take you on
12 in a debate, because this is unfair.

13 Now, look, I directed a question
14 to the audience. Do they want both sides brought
15 forth, before the teenagers? Do they want, as well
16 as the potential physical, and let's say psychological
17 hazard as written, or do they also want to have before
18 them the other side of the story, that story which is
19 written concerning the positive and beneficial effect
20 of the psychedelic experience?

21 THE PUBLIC: Well, yes, that
22 is all right, but we might have this beneficial
23 experience and it may be beautiful, and then two
24 months later have a recurrence. That wouldn't be so
25 beautiful.

26 THE CHAIRMAN: I think we are
27 being asked to assume that there are some positive,
28 unqualifiedly positive things about some of these
29 drugs.

30 And assuming that fact, would

1 we be prepared to have them stated as part of a
2 complete informational program on drugs.

3 THE PUBLIC: Yes, as long
4 as they take the other side too, about the recurrence.

5 And this young girl that I
6 have in mind, is in the now generation. She was on
7 LSD and she was on for a year, and she still has
8 recurrence. In the supermarket she sees all
9 the tin cans, and people, coming towards her.

10 Now, these kids all laugh, but
11 they may not have gone through that experience you
12 see.

13 Now, some people have had it,
14 and it is not really funny.

15 And then at home at times, the
16 walls close in on them. Now, it seems that these
17 things, and I have heard of some other drug programs
18 discussed. I didn't know there was such a thing as
19 recurrence.

20 THE CHAIRMAN: Would you like
21 to speak about recurrence, Dr. Lehmann?

22 DR. LEHMANN: Well, there are
23 certainly such problems of recurrences, and flash-
24 backs, and prolonged states of mental unbalance.

25 But that was just part of the
26 program. These would be the negative effects, and
27 of course, it would have to be pointed out, just as
28 if children would learn about penicillin, one should
29 not only tell them it is a miracle drug and cures
30 everything, one should also tell them that a good

1 number of people die from penicillin every year. It
2 is not very many, from the many that are saved, but
3 it does occur, and in other words one would have to
4 give both sides of the story.

5 In other words, the question
6 of Dr. Segal was, well, yes, we will give the negative
7 side, but we will also give the positive side, and
8 would the parents agree to this, that this would be
9 taught; that there could be positive effects?

10 THE CHAIRMAN: Gentleman
11 coming to the microphone.

12 Excuse me.

13 THE PUBLIC: Ladies first.

14 THE PUBLIC: As a parent,
15 both
16 and a teacher, I would like to see/sides taught, as
17 long as there is not an over emphasis on the positive,
18 and a de-emphasis on the negative. As long as they
19 could both be presented with equal time, then I
20 agree with the young people.

21 THE PUBLIC: Sir, I would
22 like to reply, if I might, through you, Mr. Chairman,
23 to Mark's invitation, to suggestion as to how the
24 thing should be handled.

25 I feel there is a third side,
26 as well, Mark, that you should emphasize, namely
27 the associations which the administration of these
28 drugs are liable to bring an individual into contact
29 with, the unpleasant association, the necessity to
30 obtain funds, and able to procure/other drugs and the

1 various undesirable associations, personal and other-
2 wise, which these habits lead one to.

3 Now, having seen something
4 of what happens, one gains the impression that the
5 problem is not being handled as wisely as perhaps
6 it might be.

7 I feel that the psychedelic
8 experience, which is quite an interesting phenomenon
9 if one is subjected to it, may be something that the
10 student, boy or girl, might get a thrill out of. But
11 I am more worried about the associations he is likely
12 to make, as a result of incurring these habits, and
13 what it will lead to. This is what worries me, as
14 a parent, and particularly after discussing this
15 matter with the parents of a number of kids who
16 have become hipped on this, for one reason or another.

17 I feel it is our duty, as
18 parents, to do something to protect these people
19 from hurting themselves. Nothing is worse than
20 seeing a man, and his family, go wrong, to use these
21 drugs.

22 As far as I am concerned, there
23 is absolutely no place for non-medical drugs in
24 any school for example, without the express permission
25 of the boys' or girls' physician, or by permission of
26 the school nurse. And I really think it is our
27 duty at the present time, to stop our children from
28 being ruined from these stupid and useless drugs
29 which have no particular value at all.
30

1 I think the situation is very
2 bad. Canada is a young and growing country, and also
3 I might add that those of us who have seen what drugs
4 have done in other countries, and the fact is that
5 once they are introduced into a country, you cannot
6 get rid of them. It is impossible.

7 The whole moral fibre of the
8 country goes down, and in certain parts of the world
9 drugs get such a hold of these individuals, that the
10 situation is inextricable. You cannot get rid of it.
11 And I would just hate to see the same thing happen
12 in Canada.

13 I know, Mr. Chairman, there is
14 maybe a big enough generation gap between us here,
15 you boys and girls here, but there might even be a
16 bigger mental gap between you and me.

17 THE CHAIRMAN: I don't think
18 that is probably true.

19 THE PUBLIC: Did you say, that
20 if the people were told about drugs, all the youth
21 would go out and turn on to them.

22 Is that what you are saying?

23 THE PUBLIC: I'm sorry, I
24 just don't quite follow your question, I don't under-
25 stand your question.

26 Would you mind repeating it
27 again?

28 THE PUBLIC: I said, are you
29 saying that if the truth was told, both the negative
30

1
2 and positive sides, are you afraid that the young
3 people would rather take the positive side, than the
4 risk of the negative side?

5 THE PUBLIC: Oh, that's
6 impossible.

7 I couldn't tell you how they
8 would respond. It all depends how it is presented.
9 It all depends what particular frame of mind that
10 child is in, whom you present it to.

11 If the child is in a bad mood,
12 he might do one thing, and if he was in an extremely
13 good receptive mood, he might do another. That is my
14 interpretation of it.

15 Individuals pretty much often
16 respond according to the situation there. If you do
17 it just before examination time you might get one
18 response, and after examination time, and everybody
19 has passed, you might find they would be highly reason-
20 able, and may not do it.

21 I hope I have answered the
22 question.

23 THE CHAIRMAN: Gentleman at the
24 microphone.

25 THE PUBLIC: I would like to
26 take up the challenge which Dr. Segal has put forward
27 with regards to putting both sides of the story.

28 That is exactly what we want
29 to do, except for the fact that we are going to put
30 both sides of the story, we had better not only put

1 it the way it is, but put it in the language that
2 people can understand.

3 Now, there is no sense in
4 talking to a certain age group about
5 psychiatric existentialism, and all this kind of stuff,
6 keep it in the everyday language, so that people know
7 what you are talking about.

8 And that is the same way it is
9 going to have to start from grade one, or grade two,
10 and bring it up all the way through.

11 Now, I would like to know how
12 many adults here, of my age, would be able to pass
13 a grade eight geography exam. Now, at the time that
14 we were in grade eight, we were well aware of every-
15 thing that was going on in that one subject, and I
16 am quite sure that the teenagers here understand what
17 Dr. Segal was saying, using both the psychiatric uses,
18 and that, about taking these hallucinogenic trips,
19 etc.

20 I think that both ways should
21 be, both sides of the story should be put, that is
22 the only way it can be provided, that one isn't
23 played up against the other. Because I agree with
24 my friend over here, that depending upon the mood
25 that the person is in, it is how -- the effect you
26 receive it. It is no different with drinking.

27 You can take -- it is only
28 five percent of the population who
29 do drink who will become alcoholics.
30

1
2 Now, if you have to equate
3 this five percent against whether or not you are
4 going to , or you are not going to take a drink,
5 it is going to be the same way if we are speaking
6 about cannabis, or anything else.

7 THE CHAIRMAN: Thank you.

8 THE PUBLIC: Then it should
9 be us educating you then? Is that where you are at?

10 What has been said here by
11 most of the adults, is there should be mass education
12 for the youth. I think there should be mass education
13 for you people, because I don't know where you are
14 at, or what you are talking about.

15 THE PUBLIC: Well, well, well,
16 every day we learn something new.

17 I am afraid that that young
18 man is not interpreting the questions the way they
19 have been put.

20 We were talking about education.
21 We were saying that the education, and the way that
22 the education be put in the text book, or wherever
23 it is going to be disseminated to the grade one,
24 two, three, etc., would be for their age group.

25 Now, if they want to go to
26 the high schools, they can't expect a grade two
27 child to learn the same type that they are going
28 to receive in the high school. They have to be
29 brought up all the way through, and given both
30 sides of the story.

THE CHAIRMAN: Thank you.

THE PUBLIC: May I ask one question?

Why is it the people who have used marijuana are almost unanimous in saying, "Legalize it, and legalize it now." And there are a very large portion of people who have never experienced it, and have no idea of what they are talking about, say, "Don't, it is dangerous."

THE PUBLIC: Why was it illegal in the first place? Where did you get your information source to make it illegal? Why did the government lump it all together, and why are you digging so far for information now?

Why was it then, to make it illegal in the first place? And it is only the adults who have the vote, and there aren't any adults who try the stuff.

And LSD and marijuana are in two different categories.

Marijuana, according to accounts that I read, is very harmless, except that it can only lead to stronger drugs. The rest of the stuff has after effects.

DR. LEHMANN: I don't think we should generalize too easily. There are quite a few people who have smoked marijuana who are not for legalization, and there are many people who have never smoked marijuana who are for legalization.

1 So it is too easy to say it
2 is as simple as that, if you have smoked it you are
3 for it; if you haven't smoked it, you are against.

4 That sounds good, but it is
5 not really the truth.

6 I was interested in the question
7 of one young man, and quite seriously, if he would
8 like to repeat it again to the parents here, namely,
9 what would they think of a program of education for
10 parents?

11 This is a very serious con-
12 sideration that the Commission had. Well, we had
13 to consider this kind of a problem, because there is
14 no discussion possible between parents and teenagers,
15 if the parents do not speak the same language, and
16 do not have the same factual information as teenagers.

17 And since dialogue between the
18 teenagers and parents is very important, in order to
19 overcome the communication gap, there is only one way
20 of going about it, and that is the parents somehow,
21 not only from the news media, but perhaps in some
22 other ways, through discussion groups, or lecture
23 courses, might have to take a course, or be educated.

24 Not in school, but in some
25 other way. I wonder how the parents feel about this?

26 THE PUBLIC: I would like to
27 speak on two points. Firstly, the point about
28 education.

29 You seem to take for granted
30

1 that because you are taught something, that it is
2 going to make a big change.

3
4 I believe we would all be of
5 the same opinion that we have known for quite a
6 while, ~~that in most wars~~ many people get killed. It
7 hasn't changed any.

8 You can learn all you want
9 about drugs; you can show people all there is to
10 know at this point about it, but will it change any-
11 thing. I don't think it will. Because all you are
12 getting at, really, are the results of causes. And
13 until you find these causes, then the problem will
14 exist whether it be drugs, whether it be that evil
15 person driving down the road at 90 miles an hour,
16 or whether it be someone in here smoking against
17 regulations, or whether it be somebody going out
18 and killing someone.

19 These are the results. Drugs,
20 I believe, are the results, not the causes.

21 THE CHAIRMAN: What are the
22 causes, in your opinion?

23 THE PUBLIC: If I knew the
24 causes, I would copyright them, and I wouldn't have
25 to worry about anything else for the rest of my
26 life.

27 I don't know the causes. But
28 perhaps people who have these problems, or have these
29 results, can tell us the causes.

30 And also, you would have to, I

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think, find out whether these are problems. Perhaps they are only problems in the eyes of the law, or in the eyes of adults.

Perhaps in essence, they are not problems at all.

THE CHAIRMAN: Lady at the microphone.

THE PUBLIC: I have read, in a responsible magazine, the trafficking of drugs such as LSD and others, is getting out of control, and the extended use of the hallucinogenic drugs has proven harmful.

The acute effects of the use of marijuana are known, but the chronic effects are not completely, or conclusively known, at present.

I would like to see the present laws for the sale and use of marijuana retained, and I think more education and research is needed into the hallucinogenic drugs, and there should be tighter control on all drug abuse by more rigid Federal Government supervision.

Thank you.

THE CHAIRMAN: Was that Goddard in Life Magazine?

THE PUBLIC: No. It was National Magazine.

THE PUBLIC: I have been listening to a lot of talk about details and stuff about drugs and stuff, here today.

1
2 But I think the important thing
3 is, the thing that all these young people are here
4 now, that the drug thing is just a small focal point
5 in something very big that is happening.

6 You may not know it, but it
7 is. I am very aware of it. And you have
8 two choices you can make. You can either make it
9 legal and give us a chance to work, and expand, and
10 grow legally within the system, or you can declare
11 it illegal, and make us become a criminal subculture,
12 as people have said.

13 So you have got two ways to go.
14 You can legalize it, and let us take that path, or
15 you can leave it the way it is, and build some more
16 jails.

17 THE PUBLIC: I would like to
18 speak first, because my point is about the last point
19 you made, the gentleman in the grey suit, and the
20 point that you made was that drug use leads to ill-
21 association, which I don't think is true.

22 I think you have sort of an
23 outmoded stereotype of the fourteen year old person
24 meeting his junkie pusher, or something, on the corner
25 of Creighton Streets, where they meet, I am not sure,
26 at three o'clock in the morning, and passing over
27 three thousand dollars for a nickel bag full
28 of strychnine, or something.

29 I don't think this is an
30 entirely fair concept. I think that your idea about

association could be partially true. I don't think it is very true, though. And I think that if it is true at all, the reason is the present existing law, which you, in the same statement, asked to be retained.

Thank you.

THE PUBLIC: This is even getting more interesting than I thought.

I came to another point of view. We are in this country, in an economic situation which demands that everybody pull his full weight, and exhibit his maximum earning capacity, at the soonest possible moment.

Take the situation which arises when you are leaving a family of relatively poor means, or of humble means, who has a teenage or young boy, who has got to earn a living, as soon as he possibly can to support his family, or maybe he would have to support a mother.

I had specific instances in mind, in my somewhat outmoded philosophy, which you complimented me with, sir. I have some situations in mind, where the boy or girl has turned to drugs.

Now, this occurs at a juncture in the age cycle, where the individual is, and would be normally at their maximum earning capacity, and with circumstances that compel them to as much as it possibly can, as quickly as they can.

Now this hits them at a very,

1 very bad time, and the impact on a parent in such
2 circumstances, is very tragic.

3 And I often wonder if some
4 of the young people realize how much pain and suffering
5 they cause their parents, who are in the situation.

6 Now, as far as I am concerned,
7 I would like to see every one of you succeed, and
8 see you with a good career, and do well, and be
9 prosperous. There is nothing more than I would be
10 happy to see you do well, every one of you here, and
11 there is nothing that would appall me more than to see
12 you people being tied up with these stupid and useless
13 drugs, which don't do a thing.

14 THE CHAIRMAN: Lady at the
15 microphone.

16 THE PUBLIC: I would like to
17 pick up that making of a good living, as a value.
18 I think perhaps our young people are thinking more
19 deeply than some of us adults, and we are not sensitive
20 enough to their value system. And perhaps this is
21 one of the reasons why they are willing to take a
22 risk, because they cannot compromise their value
23 system with a kind of an outmoded structure, that is
24 not compatible with their deep desires.

25 And I don't think the government
26 can do much about inquiring, unless they are deeply
27 sensitive to young people, and really inquire into
28 their wants to reform our society.

29 And in my work with young people,
30

1 I find frustrated, because we, as adults, are not
2 sensitive enough to their problems.

3 And I think that the problem
4 goes much deeper than the mere taking of drugs, or
5 the mere legalizing of drugs.

6 Now, there will be some young
7 people who disagree with that, but I am speaking of
8 the deeper thinkers of our young people, and most
9 of the time, I find it goes much deeper than a drug
10 problem.

11 There are many, many other
12 problems that we adults are not listening to.

13 Thank you.

14 THE PUBLIC: I would like to
15 fully agree with what has just been said.

16 It would seem to me, that as
17 the speaker before me, the last lady said, the thing
18 about the drug problem is just one aspect of a much
19 larger thing.

20 It seems to me that in terms
21 of simply the survival of the human species, we have
22 to make sort of enormous breakthroughs in conscious-
23 ness, you know, consciousness in any sense of the
24 word, at every level.

25 In our society, we have to
26 sort of break out of all authoritarian perspectives.
27 And in this regard, the legislation against drugs
28 is just one aspect of this whole sort of authoritarian
29 way of thinking. And perhaps there are a lot of other
30

1 measures that have to be done, simply in order that
2 we don't have a complete breakdown of our society.

3
4 You know, there are other
5 things that probably have to be done, too, things
6 like introduction of the guaranteed income, and
7 things like that.

8 And finally, I don't think you
9 can legislate such psychological complexity. When it
10 comes down to it, the use of hallucinogenic drugs is
11 rather like anything else, only a lot more so, and
12 that is, it is very complex. But finally, when
13 it comes down to it, each individual has to decide
14 whether he wants to use, or give up use, or start
15 use of drugs, in accordance with his growth as an
16 individual human being.

17 THE PUBLIC: I would like to ask
18 a question of this elderly gentleman here in the grey
19 suit.

20 When he was talking about kids
21 in poor conditions, spending their money that they
22 should be keeping the family up with, on drugs.

23 I wonder if he realizes that
24 the average kid can go out and get quite a nice high
25 for about fifteen cents. Or you can buy sniffing
26 glue, or that for a minimal amount of money, you can
27 get various depressants, or stimulants, and it doesn't
28 really take a great deal of money to
29 do that.

30 And also I was wondering, if

1 he seemed to think that a person turning to drugs
2 could no longer work to earn a living.

3
4 THE PUBLIC: Without making
5 any personality issues, I think the gentleman in the
6 grey suit has most articulately described the precise
7 nature of the problem.

8 We might be discussing about
9 a chemical medium, which may in the end prove to be
10 quite harmless in the point of view of bad effects,
11 and with all due respect to the gathering of information
12 done by the other gentleman, I think what we are up
13 against, is an attitude which any amount of information
14 won't change, and it is the attitude of the legislators
15 of our society.

16 We have a society, and its lead-
17 ers establish rules, to which they would like to force
18 society to move towards, the fence, to direct the
19 route of our lives.

20 Now, whether the laws establish
21 facts, which are true or not, is irrelevant, as long
22 as the laws promote the community's effort toward
23 that goal.

24 What we should be discussing,
25 and what we can discuss, is precisely the nature of
26 these ultimate goals, which involves basic philosophy
27 behind governing it. But I think in the end, the
28 basic, and most important problem, is what we are,
29 as we grow, as we are being educated, that we are
30 being, not brainwashed, but instilled with, what we

1 can move towards, besides being educated.

2 The gentleman spoke about being
3 a success, working hard, supporting a family and so
4 on. We are always aware that these goals become
5 relevant in that the affluent society in which we
6 live, gives us all these things.

7 And I think, in really finding
8 our values, we must stick more with the individuals
9 mind, consciousness and satisfaction, more than his
10 function as a gear, one element in an immense machine
11 called society.

12 THE CHAIRMAN: Gentleman at
13 the microphone.

14 THE PUBLIC: Mr. Chairman, I
15 am almost, excuse me, afraid to get up, because when
16 I sit down one of these young people are going to
17 point to me and say, "That old fellow in the grey
18 suit."

19 I always pretend to think that
20 I am still young.

21 I came in here this evening,
22 I should say as a parent, but I have a rather well
23 grown son, so I came in as an interested citizen in
24 this particular inquiry, because I am interested in
25 this problem, and I have to agree with the young
26 people here tonight, that I am appalled at the lack
27 of people, parents, fathers and mothers, who should
28 be very, very concerned about this issue, and the lack
29 of them here tonight.
30

1
2 It is certainly something that
3 is shocking to me, must be shocking to these young
4 people in a day and an age when this society needs
5 an enlightened youth, a youth with a clear mind,
6 clear thought. We have contaminated their world; we
7 have contaminated their water and their air, and they
8 have to find solutions.

9 But the man that perhaps would
10 help you gentlemen to listen to me for just a moment,
11 and it might help the young people, because they
12 should perhaps understand the feeling we, the elder
13 society, and perhaps I can refer to myself, because
14 perhaps I am speaking as an average Canadian citizen.

15 We are frightened, I am
16 frightened for you young people. Now, I know that
17 you say, "So what?" You point your finger at me,
18 and say, "Sit down, we are not frightened about our-
19 selves." But just listen to me for a moment.

20 I am frightened for the young
21 people. I am frightened that the information they
22 are getting today by experts, because I feel that
23 until we know, and gentlemen if your Commission can
24 do anything, and as I say, I came here tonight for
25 information. I want to know, and I thought I might
26 find out tonight, whether marijuana, because that
27 seems to be the most prevalent used drug by the
28 young, if marijuana is indeed bad, if it is harmful.

29 I have read so much about it.
30 As you have stated earlier, everybody is left in a

1
2 quandry. Is it good; is it bad; is it harmful? We
3 have to know.

4 And I say we, because this is
5 important to the older generation, as it is to young.
6 And I think until the young people know, how in the
7 wide-world can we tell them do or don't.

8 And so if this Commission can
9 do anything in helping to determine the facts on drugs,
10 I think that it will be a marvelous thing.

11 If you go back, and your Comm-
12 ission comes through with a report that says, "Well,
13 it is good in this case, and it is bad in that case,"
14 and you don't come out with a conclusion, you are
15 doing exactly the same thing that has been done up
16 until January 29, 1970. And we damn well don't want
17 that again.

18 So give us a report, let the
19 young people know, tell them the truth. I don't care
20 whether it says they should have marijuana, or it
21 says they don't, but tell them the truth, because
22 youth needs the truth. The older people need the
23 truth, the citizens of Canada need the truth, and this
24 is your job, and give us the truth.

25 THE PUBLIC: Perhaps I am
26 raising a rather dangerous question, but I would like
27 to have some reaction from the young people who care
28 to respond to this, and possibly from the panel.

29 I have heard it said, and I
30 feel as a teacher, and as a counsellor, and I hope as

1 a friend of youth, that in using drugs they are
2 reacting against materialism, and against the
3 earthly values of our society.
4

5 Maybe if I could put it that
6 way. Against the pursuit, the extreme pursuit of
7 money, and all that goes with it, although it is
8 very necessary, and that perhaps in using drugs
9 they are looking for something which the religious
10 experience supplies.

11 I just wonder if they are not
12 looking for something that we are not offering them
13 in their present society.

14 THE PUBLIC: If you pardon me
15 for just making one comment about two gentlemen who
16 kindly identified me as the man with the grey suit.
17 All I want to tell them, if you get too much at the
18 time, and you find you are having difficulties, I
19 might be able to recognize it.

20 THE CHAIRMAN: Gentleman at
21 the microphone.

22 THE PUBLIC: I think, and it
23 seems the purpose of the Commission is, to seek the
24 truth, and you are here tonight to ask us what we
25 think the truth is perhaps.

26 Well, some people say the
27 truth is in yourself. Now, if I have an opinion on
28 marijuana, which I do, then I have found a truth for
29 myself.

30 I mean, this is a philosophical

1 question, a philosophical question of asking why, as
2 Plato, or Socrates would say. I have asked that
3 question, and I have found the answer, I think, through
4 the use of marijuana perhaps.

5 I think that your job is to ask
6 us, if we think that marijuana should be legal. I
7 will give you my personal answer. Yes.

8 THE PUBLIC: I find it very
9 hard to sit here and stay calm, because this is my
10 personal opinion. I think Canada, I think the world
11 in general, is a very, very tight place, very tight.

12 I think that everyone sits
13 around and waits for maybe you to make a decision
14 whether it is right to smoke marijuana. And for
15 myself, I think if I felt like I wanted to fly, I'll
16 try, and if I feel like I want to smoke marijuana,
17 or take LSD, or drive down the middle of a sidewalk
18 on a motorcycle, I will try. I may be stopped by the
19 police, or whatever, but it is that thing. Like a
20 gentleman wanted you to decide for him, whether he
21 thought it was right to take marijuana.

22 I don't think you can really
23 decide for anybody. I think if the drugs themselves
24 are made legal, I think people will have the chance
25 then to decide for themselves.

26 I think it is a very important
27 thing to be able to decide for yourself.

28 THE PUBLIC: I would like to
29 speak to the question I think Dr. Segal raised, about
30

1 having both sides presented from the school.
2

3 I think it is academic, because
4 I think it has already been done. The
5 use of drugs is not led by the underworld, it was
6 led by a college professor, and the teachers are
7 already discussing it.

8 That doesn't mean I necessarily
9 agree with it. Nevertheless it is being done now.
10 But what I would like to see, that there be one
11 regulation at least, come from this Commission, that
12 there be a good deal more checking out statements
13 being made.

14 I am thinking in terms of the
15 fact I have heard a number of sweeping statements
16 here on both sides, and if I made a sweeping state-
17 ment I would probably be checked up as well, but
18 there have been a number of sweeping statements, some
19 of which were pure propaganda.

20 For instance, the statement,
21 and I know the man they were quoting was Dr. Unwin,
22 only they weren't quoting him, they were misquoting,
23 that marijuana should be legalized in his opinion.

24 I was at a drug conference
25 last year, and Dr. Unwin was there, and I think
26 really it was his own fault because he wasn't making
27 himself clear, and it wasn't until he realized that
28 he was being interpreted as saying he believed in
29 the legalization of marijuana, not the lessening of
30 the penalty, but the legalization, and he stood up

1 and made himself abundantly clear to everyone there,
2 and I think you know Dr. Unwin is one of the leading
3 experts on this matter in Canada, that he definitely
4 did not believe in the legalization of marijuana.
5

6 Again I am not saying he is
7 right or wrong on that. I think the statements that
8 were made should be checked out.

9 My own experience which has
10 been going into courts and mental hospitals where
11 people who are broken up over any number of things,
12 is that a number of times marijuana has been involved.

13 But before anyone tells me
14 there^{is} no possible damage, I want a little more objective
15 conclusions, and tests. As far as I know, in the
16 courts, there is very little being done about the
17 people who are involved with it. That doesn't mean
18 just the person picked up for marijuana. I would
19 wipe that out as far as testing is concerned, but
20 the people involved in other things.

21 And thirdly, I would like to
22 say this. When the question is presented, and there
23 is no reason why it shouldn't I suppose; when the
24 question is presented, is it going to be just a matter
25 of what is right, or what is wrong with drugs?

26 But is the question also going
27 to be asked, is this the only way you can find any
28 meaning in life. I am with anybody who says our
29 present society is materialistic, phoney. I am not
30 with anybody, that says the only way is to get out

1 of it, give a jolt to the central nervous system.

2 Is the question going to be
3 asked, is this the only way you can find meaning
4 in life? Perhaps for some people it is.

5 And I would like to say one
6 last thing. Even though I may disagree with a lot
7 of what was said, I would like to pay tribute to
8 the gentleman in the grey suit, who had the guts to
9 stand up against a hostile audience.

10 THE CHAIRMAN: I think as a
11 matter of information, and public record, I should
12 correct the position about Dr. Unwin now, because
13 Dr. Unwin did make a submission in his private
14 personal capacity, not as a member of the C.M.A., or
15 the committee which formulated their policy. He did
16 make a submission in his personal, private capacity
17 to us, in Montreal, in public, that after much
18 anxious thought, reflection, he had come to the
19 conclusion that he must favour the legalization of
20 marijuana, because of the effects the present
21 criminal law treatment was having.

22 And this did not have any
23 bearing on his scientific judgment, as to what we
24 know about the effects of marijuana, which are
25 very carefully reflected in that paper that he
26 helped to prepare for the C.M.A.

27 I mention this, not to embarrass
28 you, or contradict you in public, but simply because
29 this was said at our hearing in public, and I think
30

1 it is our duty to set that -- to inform you of that,
2 a fact that you probably were not aware of.

3 This was in Montreal, at our
4 hearing in November.

5 THE PUBLIC: Yes. I think that
6 probably would be his opinion, if the laws were
7 changed.

8 But Dr. Unwin's opinion, at
9 least that he gave to the meeting, and as he gave
10 it to me personally, and as he repeated it on the
11 stage, and he may have changed his mind since then,
12 was that marijuana should be put under the Food and
13 Drug Act, not legalized, and that is a big qualification
14 under the present legal system.

15 MR. CAMPBELL: This is quite
16 correct, I heard Dr. Unwin make this statement a year
17 ago, in fact as recently as about six months ago, and
18 then he changed his position really quite recently.

19 THE PUBLIC: Yes, I would just
20 like to say this. I think it is highly -- well I
21 think it is up to the individual whether they feel,
22 you know, whether it is right to take marijuana, or
23 not.

24 I mean, making a legalization
25 of marijuana, you know, it is a universal thing. I
26 shouldn't say universal.

27 Here in Canada, like, it would
28 help the situation out, I would say in probably seventy-
29 five percent.

30 Anyway, if marijuana isn't

1
2 legalized now, most kids are taking it anyway, so
3 why don't you make it legal?

4 I think it should be legalized
5 myself. That is all I have to say.

6 Thank you very much.

7 THE PUBLIC: I would like to
8 make one suggestion to the Commission. This is
9 supposed to be a Commission of Inquiry. So far
10 very few questions have been asked. We have listened
11 to personal opinions, philosophical discussions.

12 I have not personally gained
13 anything from them. I think if this Commission is to
14 be successful they should ask questions, because they
15 have ideas of what they want to find, and this
16 audience, I don't think knows what the ideas are.

17 Thank you.

18 THE PUBLIC: The Commission did
19 ask a question earlier tonight about the small number
20 of parents who are here.

21 Now, I am a teacher, and poss-
22 ibly one of the reasons may be, perhaps I shouldn't
23 preach at the parents, is that we are going to have
24 a seminar for teachers, dealing with the drug prob-
25 lem, in February, and the students of our schools are
26 well aware of it, and the parents are also well aware
27 of it, because the students will all be out for that
28 day.

29 Now, in a social studies class
30 that I was taking the day the notice came around, this

1 was a grade eleven class. The average age would be
2 sixteen or seventeen, it was a class of girls. And
3 not that I wouldn't get just as honest an opinion,
4 or a more honest opinion from the boys.
5

6 So when the notice came around,
7 I said to the class, "Do you think that the drug
8 problem in Halifax is such that it warrants dismiss-
9 ing so many classes, and having the teachers assemble
10 for this seminar, for a full day?"

11 So I said, "Just think about
12 it a while." And there was information that I needed
13 that I had to send back to the office, so I went down
14 to do that, and then I asked for the answer.

15 And the question was answered
16 in this way: they said they were glad that teachers
17 from elementary grades were being brought to this
18 seminar. They felt that high school students -- I
19 am not saying I agreed totally with their opinion
20 in this case, high school students who were using
21 marijuana, or who might be glue sniffing, or who
22 might be using other types of drugs, knew what they
23 were doing. But they thought that it was a good
24 idea, on behalf of the school board, to try and
25 protect the children in the elementary grades from
26 the saddened states that some have already encountered
27 due to the use of drugs.

28 The class was very objective
29 about it. We didn't have as many impassioned
30 speeches as we had here tonight, and we had, the class

1 felt that this was a good move.

2
3 Personally I feel that the
4 parents may think that because the teachers are
5 being indoctrinated, that once again the teachers
6 should take over their problems.

7 Now, I feel that the Commission
8 should really try to find a way of educating parents.
9 The teachers are not the people to do the work of
10 parents. And I sympathize with the young people,
11 and I feel that this is one of the problems that
12 there is a communication gap, and that is with all
13 due respect to parents tonight, about disregarding
14 the generation gap, I feel that this is one of the
15 problems. That the parents have to be educated.

16 A second thing is, that I would
17 say that if a drug education program is put into the
18 school, I do not think that they should be put in as
19 it has been in some schools in other regions where
20 I have taught, as part of the physical education
21 program, as we have had the alcohol problem in some
22 cases, and it should -- and that it would be taught
23 by any teacher who happened to be teaching health
24 as a subject.

25 I think we should have
26 specialists. I think the people who would give
27 this information would have to be a very special
28 type of person.

29 For example, I agree with
30 Dr. Segal, that if the information is going to be

given, both sides of the question must be presented.

And here again, I would draw attention to the fact that in our system of education, from primary up, we have taught our students to question everything that we teach them.

Then when we get into the realm of moral decisions, and religion and drugs, and so forth, we seem to think that we can say to them now, "We told you to question in science, we told you to question in history, we told you to question here, but now you must stop. You must take just one side."

So we cannot blame the youth for the questioning attitudes that they have towards everything, the enquiring attitudes they have towards everything. We have ourselves adopted this system of educating them, within the last twenty-five years. And so we are reaping the rewards in many cases.

And I say rewards, because not all people who use drugs are going into a subculture, and we have to admit, and I disagree with one of the young speakers tonight, who said, "adults use drugs. Adults use drugs; they know they are using them; they are able to control the way they use them in many cases."

But with young people, I think if they are going to use drugs, then they must know the right information, they must be able to cope with the results of that choice that they make.

1 And I certainly think that the
2 elementary grades, no student has that power to make
3 that choice, at that early age.

4 And I feel that the responsibility
5 of the school system, and the parents, should be to
6 educate the students at that level.

7 I have been glad to hear some
8 of the opinions tonight, and I think perhaps the
9 parents may not be here, because of the fact that they
10 feel the teachers will supply some of the information
11 possibly that we may garner, next week, or the week
12 after.

13 THE PUBLIC: I would like to
14 reiterate that statement.

15 In one day we can get people
16 feeling secure about drugs. We have had one day,
17 and two day, and three day sessions, with experts
18 giving their opinion that way and the other way, and
19 as one of the so-called experts sometimes I am not
20 sure of what I am supposed to say, because I think
21 we have got into this problem earlier tonight, but
22 this is a very complex subject, and it helps to get
23 a one day information session, but without the
24 facilities of follow up, or something to refer back
25 to, like a good reading lesson, it becomes very
26 difficult for anybody to pick up enough information
27 in one day, retain it in their heads, and that is
28 the end of it.

29 I think the attitude that says
30 that we may have a drug problem, therefore, let's

1 have a drug seminar, and we will do a one shot
2 thing, and that will be something done, is being more
3 than a little naive.
4

5 In terms of changes of
6 possible approaches in the school system, I agree
7 entirely that usually what happens is that somebody
8 gets picked to do the drug education, and that is
9 not necessarily a good way to go about it.

10 Usually, in one school, in
11 every school, there is one person that can really
12 talk to students, as a good information feedback.
13 And that person should be the one who is given enough
14 free time, and information, to be able to discuss
15 subjects which are not part of the regular curriculum
16 for which you don't have to take exams, and make
17 points, and I include in this list, media analysis,
18 advertising analysis, sex education, all those
19 issues which are of immediate relevance and interest
20 to students from which they cannot bring up in the
21 regular program, because it is not allowed.

22 One thing I would like to
23 recommend to the Commission, that it recommends, is
24 it seems to be a growing accepted principle that if
25 you expect to work properly with information, and
26 systems, for example you start where the youth are,
27 that's the idea of a detached youth worker.

28 Instead of waiting in your
29 office nine to five, or you come in at two-fifteen,
30 for fifteen minutes and out the door, I would like to

1
2 apply that same principle to adults, and let's
3 start.

4 If they won't turn out for
5 meetings, let's start where they are, and they are
6 probably sitting home watching television. So let's
7 stop wasting our prime time on silly little
8 programs to amuse somebody during supper, and have
9 the media devote half an hour, a regular series of
10 programs during prime time, to a very good, and
11 carefully researched drug education session.

12 Now, I cannot see that we can
13 continue as it has been done in many communities,
14 particularly Halifax, waiting for the parents to turn
15 out.

16 In my experience, it is just
17 not going to happen, so we are going to have to try
18 another way, and that is to get to them. This is
19 radio, T.V., and newspapers.

20 THE CHAIRMAN: Thank you.

21 I think I should adjourn the
22 meeting now.

23 It is twenty-five to eleven.
24 We are all very obliged to all of you who have come
25 tonight, to assist us with your views, and we will
26 be at the Lord Nelson tomorrow at nine o'clock.

27 --- Upon adjourning at 10:35 P.M.
28
29
30

